I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT DEICHMAN

Electronic Signature of Signing Authorized Person(s) Detail

1910 SW 18TH CT, BLDG 100 OCALA. FL 34471 US

Name and Address of Current Registered Agent:

DEICHMAN, ROBERT 7447 SE 12TH CIR. OCALA, FL 34480 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	DEICHMAN, ROBERT	Name	DEICHMAN, NANCY
Address	7447 SE 12TH CIR.	Address	7447 SE 12TH CIR.
City-State-Zip:	OCALA FL 34480	City-State-Zip:	OCALA FL 34480

04/26/2013

MGRM

FILED Apr 26, 2013 Secretary of State CC1786079165

Certificate of Status Desired: No

FEI Number: 46-0542010

1910 SW 18TH CT, BLDG 100

Current Mailing Address:

OCALA, FL 34471

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000091646 Entity Name: AMBASSADOR REFERRAL SERVICES LLC

Current Principal Place of Business:

Date

Date