2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 24, 2016
Secretary of State
CC0125101068

DOCUMENT# L13000174892

Entity Name: PAIGE INSURANCE ADJUSTING., LLC

Current Principal Place of Business:

21819 TOWN PLACE DR.
SUITE 100
BOCA RATON, FL 33433

Current Mailing Address:

21819 TOWN PLACE DR.
SUITE 100
BOCA RATON, FL 33433 US

FEI Number: 46-4346370

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PAIGE, LISA K
21819 TOWN PLACE DR.
SUITE 100
BOCA RATON, FL 33433 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 — Date

Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	PAIGE, LISA K	Name	PAIGE, GREGORY L
Address	21819 TOWN PLACE DR.	Address	21819 TOWN PLACE DR. SUITE 100
City-State-Zip:	BOCA RATON FL 33433	City-State-Zip:	BOCA RATON FL 33433

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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PAIGE, GREGORY L. MGRM 01/24/2016

Electronic Signature of Signing Authorized Person(s) Detail — Date