

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000135448

Entity Name: QUICK PAY CLAIMS, LLC

Current Principal Place of Business:

3112 56TH AVE
ELLENTON, FL 34222

Current Mailing Address:

3112 56TH AVE
ELLENTON, FL 34222 US

FEI Number: 81-3341287

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HICKEY, DAVID N
3112 56TH AVE
ELLENTON, FL 34222 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 MGR
Name HICKEY, DAVID N
Address 3112 56TH AVE
City-State-Zip: ELLENTON FL 34222

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: DAVID HICKEY

OWNER

01/17/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date