Electronic Signature of Signing Authorized Person(s) Detail

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000182207

Entity Name: VANTAGE POINT CLAIMS MANAGEMENT, PLLC

Current Principal Place of Business:

500 N. CONGRESS AVENUE D212 DELRAY BEACH, FL 33445

Current Mailing Address:

P.O. BOX 8362 DELRAY BEACH, FL 33482 US

FEI Number: 81-4020420

Name and Address of Current Registered Agent:

DECARLO, LOIS 8029 LINKS WAY PORT ST. LUCIE, FL 34986 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 AMBR DECARLO, MARK Name Address P.O. BOX 8362 City-State-Zip: DELRAY BEACH FL 33482

SIGNATURE: MARK DECARLO

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.

PRINCIPAL

01/09/2017 Date

FILED Jan 09, 2017 Secretary of State CC5603848742

Certificate of Status Desired: No

Date