

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000369738

Entity Name: FLORIDA CLAIM RESTORATION LLC

Current Principal Place of Business:

411 W. 1ST STREET
SANFORD, FL 32771

Current Mailing Address:

411 W. 1ST STREET
SANFORD, FL 32771 US

FEI Number: 85-4163706

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PETERSEN, RYAN P
8131 VIA BONITA ST
SANFORD, FL 32771 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: PETERSEN-RYAN; TR

04/06/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	CONTE, JARED W	Name	PETERSEN, RYAN P
Address	1809 E BROADWAY ST SUITE 353	Address	8131 VIA BONITA ST
City-State-Zip:	OVIEDO FL 32765	City-State-Zip:	SANFORD FL 32771

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: RYAN PETERSEN

MGR

04/06/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date