

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# 846187

**FILED**  
**Jun 21, 2011**  
**Secretary of State**

**Entity Name:** CLAIMS SERVICES GROUP, INC.

**Current Principal Place of Business:**

15030 AVENUE OF SCIENCE  
STE 100  
SAN DIEGO, CA 92128

**New Principal Place of Business:**

**Current Mailing Address:**

6111 BOLLINGER CANYON RD  
STE 200  
SAN RAMON, CA 94583

**New Mailing Address:**

15030 AVENUE OF SCIENCE  
STE 100  
SAN DIEGO, CA 92128

**FEI Number:** 94-2617005

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 US

**Name and Address of New Registered Agent:**

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:** GERALDINE MIRANDO

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PCEO  
**Name:** AQUILA, TONY D  
**Address:** 15030 AVENUE OF SCIENCE, #100  
**City-St-Zip:** SAN DIEGO, CA 92128

**Title:** T  
**Name:** GIGER, RENATO  
**Address:** 15030 AVENUE OF SCIENCE, #100  
**City-St-Zip:** SAN DIEGO, CA 92128

**Title:** S  
**Name:** BRADY, JASON  
**Address:** 15030 AVENUE OF SCIENCE, #100  
**City-St-Zip:** SAN DIEGO, CA 92128

**Title:** V  
**Name:** GREENHILL, MITCH  
**Address:** 15030 AVENUE OF SCIENCE, #100  
**City-St-Zip:** SAN DIEGO, CA 92128

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** MITCH GREENHILL

VP

06/21/2011

Electronic Signature of Signing Officer or Director

Date