

L04000020065

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

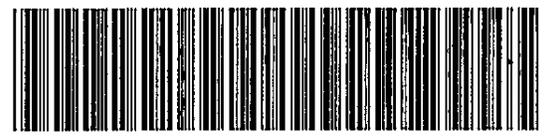
(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
04 JUN 11 PM 4:15

# **Florida Claims Consultants, LLC.**

Licensed Public Insurance Adjusters & Appraisers

June 8, 2004

Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

To Whom It May Concern:

Please accept the attached "Articles of Amendment to Articles of Organization" for Florida Claims Consultants, LLC at this time. My daytime phone number is:

954-894-0043

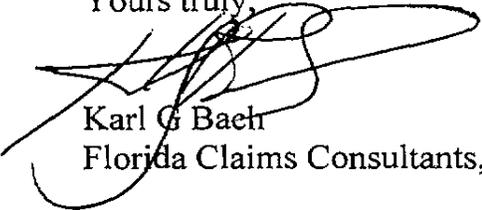
and my mailing address is:

Florida Claims Consultants, LLC  
PO Box 2361  
Palm City, FL 34991-2361

I have enclosed a check which includes the \$25.00 filing fee as well as an additional \$40.00 for a certified copy and certificate of status which will document these changes and my new "articles of organization."

Thank you for your assistance. Please call me at the above stated number if you need any additional information.

Yours truly,

  
Karl G. Bach  
Florida Claims Consultants, LLC

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DIVISION OF CORPORATIONS  
04 JUN 11 PM 4:16

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

FLORIDA CLAIMS CONSULTANTS, LLC

(Present Name)  
(A Florida Limited Liability Company)

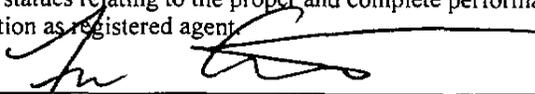
**FIRST:** The date of filing of the articles of organization was 3/15/2004.

**SECOND:** The following amendment(s) to the articles of organization was/were adopted by the limited liability company:

**Article IV – Registered Agent and Office**

The name of the new registered agent within Florida is Fredrick Antonelli whose address is 6365 Taft Street, Suite 1003, Hollywood, FL 33024.

Having been named as registered agent and to accept services of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature:   
Fredrick Antonelli

**Article V – Members**

The limited liability company has two (2) members whose names and addresses are:

Karl G Bach	Fredrick Antonelli
6365 Taft Street, Suite 1003	6365 Taft Street, Suite 1003
Hollywood, FL 33024	Hollywood, FL 33024

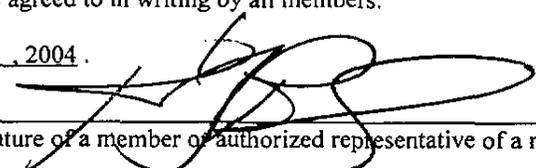
No additional members shall be admitted unless all members, (including any additional members other than original members) shall unanimously agree, and on such terms and conditions as shall be agreed unanimously.

The death, retirement, resignation, expulsion, bankruptcy or dissolution of any member, or the occurrence of any event which terminates the continued membership of a member of this limited liability company, shall terminate this company.

**Article VI – MANAGEMENT**

The management of the company is reserved to the members of the company, in proportion to their contributions to the capital of the limited liability company. The power to adopt, alter, amend or repeal the regulations of this limited liability company shall be vested in the members of the company and must be agreed to in writing by all members.

Dated June 8, 2004.

  
Signature of a member or authorized representative of a member

Karl G Bach

Typed or printed name of signee

Filing Fee: \$25.00

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DIVISION OF CORPORATIONS  
04 JUN 11 PM 4:16

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L04000020065  
FILED 8:00 AM  
March 15, 2004  
Sec. Of State  
LRIVERS

**Article I**

The name of the Limited Liability Company is:  
FLORIDA CLAIMS CONSULTANTS, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
6365 TAFT STREET  
1003  
HOLLYWOOD, FL. US 33024

The mailing address of the Limited Liability Company is:  
PO BOX 2361  
PALM CITY, FL. US 34991

**Article III**

The purpose for which this Limited Liability Company is organized is:  
INSURANCE CLAIMS CONSULTANTING.

**Article IV**

The name and Florida street address of the registered agent is:  
KARL G BACH  
6365 TAFT STREET  
1003  
HOLLYWOOD, FL. 33024

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: KARL G BACH

**Article V**

The effective date for this Limited Liability Company shall be:  
03/11/2004

Signature of member or an authorized representative of a member  
Signature: KARL G BACH

ORIGINAL  
FILING