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TO: Registration Section Division of Corporations
SUBJECT: PRIME CLAIMS ADJUSTING LLC.
(Name of Limited Liability Company)
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
BRAD CASS N (Name of Person)
PRIME CLAIMS ADDUSTING LCC.
(Firm/Company)
3521 WOOD LANE (Address)
POMPANO BEACH, FC 33069
(City/State and Zip Code)
For further information concerning this matter, please call:
BAAD CASSIN at (305) 720-7901
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$ \$\text{\$\$\text{\$\texi{\$\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

<u></u>	PRIME CL	AMS ADJ	USTING	LC	ATT OF CA	20
		(A Florida Limite	ent Name) ed Liability Comp	any)		2003 2003 2003 2003 2003 2003 2003 2003
					•	B 2
FIRST:	The Articles of Organization document number 104		11/4/04	and as	signed -	
SECOND:	The following amendmen liability company:	t(s) to the Artic	les of Organiza	ation was/were ad	opted by the lin	mited
	NAME CHAN	GE 70:				
	SELEC	T CLAIM	S ADJUS	TING LLC		
Dated	NOVEMBER 5 -11/5/04	, 2004	•			
	Signature o	f a member or auth	orized representa	tive of a member		
	6	-10			-	

Filing Fee: \$25.00

Typed or printed name of signee