2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000085733

Title:

Name:

Address:

City-St-Zip:

MGRM

() Delete

1205 SW 37 AVENUE - 3RD FLOOR

ALVAREZ, CRISTINA R

MIAMI, FL 33135

Entity Name: SOLERA HEALTH SERVICES, LLC

FILED Jan 12, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1205 SW 37 AVENUE - 3RD FLOOR MIAMI, FL 33135 **Current Mailing Address: New Mailing Address:** 1205 SW 37 AVENUE - 3RD FLOOR MIAMI, FL 33135 FEI Number: 20-3405119 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ALVAREZ, CLAUDIO R 1205 SW 37 AVENUE - 3RD FLOOR MIAMI, FL 33135 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 Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete ALVAREZ, CLAUDIO R Name: Name: Address: 1205 SW 37 AVE., 3RD FLOOR Address: City-St-Zip: MIAMI, FL 33135 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: ALVAREZ, NICOLAS R Name: Address: 1205 SW 37 AVENUE - 3RD FLOOR Address: City-St-Zip: MIAMI, FL 33135 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

Title:

Name:

Address:

City-St-Zip:

() Change () Addition

SIGNATURE: CLAUDIO R. ALVAREZ MGRM 01/12/2009