

2012 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000112545

FILED
Apr 21, 2012
Secretary of State

Entity Name: INSURANCE SALVAGE SOLUTIONS, LLC

Current Principal Place of Business:

60 STOCKTON STREET
JACKSONVILLE, FL 32204

New Principal Place of Business:

Current Mailing Address:

60 STOCKTON STREET
JACKSONVILLE, FL 32204

New Mailing Address:

FEI Number: 76-0807761

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WROTEN, BOBBY H JR.
60 STOCKTON ST
JACKSONVILLE, FL 32204 US

Name and Address of New Registered Agent:

WROTEN, BOBBY H
60 STOCKTON ST
JACKSONVILLE, FL 32204 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: BOBBY H. WROTEN

04/21/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: WROTEN, BOBBY H
Address: 1125 HWY A1A #809
City-St-Zip: COCOA BEACH, FL 32937

Title: MGRM
Name: WHEELER, WINSTON D
Address: 434 OAKLAND AVE
City-St-Zip: INDIALANTIC, FL 32903

Title: MGRM
Name: DRUMMOND, DAN
Address: SAO MANDALAY
City-St-Zip: ORLANDO, FL 32809

I hereby 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.

SIGNATURE: BOBBY WROTEN

MGRM

04/21/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date