L070000003196

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A. LUNT

FEB 18 2008

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 24, 2008

DARREN L. EPSTEIN 9 SW 13 STREET 2ND FLOOR FT. LAUDERDALE, FL 33315

SUBJECT: VIRTUAL CASE MANAGEMENT LLC

Ref. Number: L07000023196

We have received your document for VIRTUAL CASE MANAGEMENT LCand your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II Letter Number: 808A00005162

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Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Ultual Case Management, LLC (Name of Limited Liability Company)		
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Cha	nge and fee(s) are submitted for filing.	
Please return all correspondence concerning this matte	er to the following:	
Darren L. Epstein (Name of Person) Wirtual Case Management (Firm/Company) 9 SW. 13 Steet 2nd F (Address) Eart Lauderdale, FL 333 (City/State and Zip Code)	EBILL D III	
For further information concerning this matter, please call:		
Daren L. Epstein at (80 (Name of Person)	(Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is: UIHUAL Case Management, UC.
2. The mailing address of the limited liability company is: 9 SW 13 Street and two
Fort landerdale, FC 33315.
2/27/07 3. Date of filing/registration in Florida 1. Document number 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Corporate Crations Thernational In Name 11380 Prosperity Farms Rd. #221E Address Palm Beach Gardens, Fl. 33410. City, State and Zip
6. The name and address of the new registered agent and/or office:
Dayten L. Epstein Name 9 SW 13 Street and FL Florida street address (P.O. Box NOT acceptable) Fort Lauderdale FL City, State and Zip SECRETARY OF TO City, State and Zip
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.
Englature of a member of authorized representative of a member) Darren L. E. P.S. tein (Printed or typed name of signee)
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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change. (Signature of Registery Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00