

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Jan 04, 2011
Secretary of State

Entity Name: AMERICAN LOSS MITIGATION FIRM, LLC

Current Principal Place of Business:

12627 SAN JOSE BLVD.
SUITE 901
JACKSONVILLE, FL 32223

New Principal Place of Business:

Current Mailing Address:

12627 SAN JOSE BLVD.
SUITE 901
JACKSONVILLE, FL 32223

New Mailing Address:

FEI Number: 20-8663111

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ERICKSON, SUZANNE T
13820 OLD ST. AUGUSTINE ROAD SUITE 113-164
JACKSONVILLE, FL 32258 US

Name and Address of New Registered Agent:

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:

Title: MGRM
Name: ERICKSON, SUZANNE T
Address: 13820 OLD STAUGUSTINE RD SUITE113-164
City-St-Zip: JACKSONVILLE, FL 32258

Title: MGRM
Name: ERICKSON, BRENT W
Address: 13820 OLD STAUGUSTINE RD SUITE113-164
City-St-Zip: JACKSONVILLE, FL 32258

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: SUZANNE T ERICKSON

MGRM

01/04/2011

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