

207000099255

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(City/State/Zip/Phone #)

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(Business Entity Name)

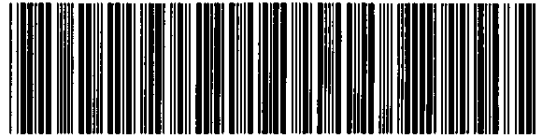
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Loss Adjuster's Management System, 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:

**Alejandra Chamorro**

(Name of Person)

**Rozenywaig, Nadel & Ferrero-Carr, LLP**

(Firm/Company)

**301 W. Hallandale Beach Blvd**

(Address)

**Hallandale Beach, Florida 33009**

(City/State and Zip Code)

For further information concerning this matter, please call:

**Alejandra Chamorro**

(Name of Person)

at ( **954** ) **455-5100**

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**FILED**  
07 OCT 12 AM 11:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

Loss Adjuster's Management System, LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on September 28, 2007 and assigned document number L07000099255.

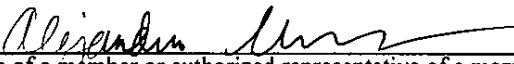
**SECOND:** This amendment is submitted to amend the following:

The name of the Manager/Member is incorrect. The proper  
spelling is: Luis J. Vicentini.

07 OCT 12 AM 11:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

Dated October 3, 2007.

  
Signature of a member or authorized representative of a member

Alejandra Chamorro

Typed or printed name of signee

Filing Fee: \$25.00