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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

L. SELLERS

FEB -1 2008

EXAMINER

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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

38 JAN 30 PH 3: 3

COVER LETTER

TO: Registration Section **Division of Corporations** SUBJECT: Advanced Claim & Inspection Services, LLC (Name of Resulting Florida Limited Company) The enclosed Certificate of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 608.439, F.S. Please return all correspondence concerning this matter to: Thomas A Preziuso (Contact Person) Advanced Claim & Inspection Services, LLC (Firm/Company) 1060 Maitland Center Commons, Suite 220 (Address) Maitland, Florida 32751 (City, State and Zip Code) For further information concerning this matter, please call: Thomas A Preziuso (Name of Contact Person) (Area Code and Daytime Telephone Number) Enclosed is a check for the following amount: \$180.00 Filing Fees \$185.00 Filing Fees, \$150.00 Filing Fees \$155.00 Filing Fees Certified Copy, and (\$25 for Conversion and Certificate of and Certified Copy Certificate of Status & \$125 for Articles Status of Organization)

STREET ADDRESS:

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

MAILING ADDRESS:

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

Certificate of Conversion For "Other Business Entity" Into

Florida Limited Liability Company

This Certificate of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.608.439, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

(Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of Indiana

(Enter state, or if a non-U.S. entity, the name of the country)

on 03/06/06

(Enter date "Other Business Entity" was first organized, formed or incorporated)

3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:

N/A

4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:

Advanced Claim & Inspection Services, LLC

Advanced Claim & Inspection Services, LLC

(Enter Name of Florida Limited Liability Company)

Page 1 of 2

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5. If not effective on the date of filing, enter the effective date: (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.)	e
Signed this 25th day of January 20 08	
Signature of Authorized Person:	
Printed Name: Thomas A Preziuso Title President/CEO	

Fees:

Certificate of Conversion: \$25.00 Fees for Florida Articles of Organization: \$125.00

Certified Copy: \$30.00 (Optional)
Certificate of Status: \$5.00 (Optional)

Page 2 of 2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Advanced Claim & Inspection Services, LLC

(Must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

1060 Maitland Center Commons, Suite 220

Maitland, Florida 32751

1060 Maitland Center Commons, Suite 220 Maitland, Florida 32751

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another

business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Thomas A Preziuso

2481 North Umbria Drive

Florida street address (P.O. Box **NOT** acceptable)

Sanford, Florida 32771

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

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ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGRM" = Managing Me	noer
MGR	Thomas A Preziuso
	2481 North Umbria Drive
	Sanford, Florida 32771
MGR	Donna Palmer
	7328 Windsor Lane
	Clearwater, Florida 33764
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