

L09000018502

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 11 2013

T. H. CLAYTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **FOCUS CLAIM MANAGERS, L.L.C.**
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Amy J. Galloway

Name of Person

Amy J. Galloway, P.A.

Firm/Company

1401 East Broward Blvd., Suite 206

Address

Fort Lauderdale, FL 33301

City/State and Zip Code

amyjgalloway@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amy J. Galloway

Name of Person

at (**954**) **315-4887**

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

AMY J. GALLOWAY, P.A.

Victoria Park Centre
1401 East Broward Boulevard
Suite 206
Fort Lauderdale, FL 33301
Tel. 954.315.4887
Fax 954.762.2554
amyjgalloway@gmail.com

September 4, 2013

Division of Corporations
Registration/Amendment Section
Post Office Box 6327
Tallahassee, FL 32314

Re: Registered Agent/Registered Office Change of Address

Dear Sir/Madam:

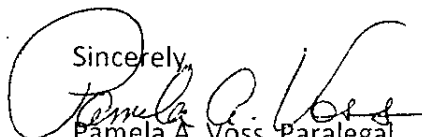
Enclosed herewith you will find Check No. 005384, in the amount of \$25.00 payable to The Department of State, Division of Corporations, along with a Change of Address cover letter form for 1st Street Agency, LLC.

You will also find enclosed Check No. 005378, in the amount of \$290.00 payable to the Department of State, and Change of Address cover letter forms for the following:

- 1) BIPT, INC.
- 2) MacNeill Group, Inc.
- 3) Focus Insurance Corp.
- 4) The Focus Foundation, Inc.
- 5) Focus Finance, LLC
- 6) Focus Claim Managers, LLC
- 7) Focus Holdings, LLC
- 8) Focus Insurance Services, LLC
- 9) Focus Technologies, LLC
- 10) Focus Real Estate Development, LLC

Please do not hesitate to contact our office if you have any questions or comments.
Thank you.

Sincerely,



Pamela A. Voss, Paralegal
to Amy J. Galloway, P.A.

Enclosures

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. Name of the limited liability company: Focus Claim Managers, L.L.C

2. (a) Principal office address of limited liability company: 1300 Sawgrass Corporate Parkway
Suite 300
Sunrise, FL 33323-2804
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company: 1300 Sawgrass Corporate Parkway
Suite 300
Sunrise, FL 33323-2804
(Note: MAY BE POST OFFICE BOX)

02/24/2009

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3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: Amy J. Galloway

Registered Office Address: 110 SE 6th Street
15th Floor
Fort Lauderdale, FL 33301

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address

NEW Registered Agent: Amy J. Galloway

NEW Registered Office Address: 1401 East Broward Boulevard
Suite 206
Fort Lauderdale, FL 33301
(MUST BE FLORIDA STREET ADDRESS)

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.

Ronald Terzer
Signature of a member or authorized representative of a member

Ronald Terzer
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.

Amy J. Galloway
Signature of Registered Agent

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