

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000045751

**FILED**  
**Oct 27, 2011**  
**Secretary of State**

**Entity Name:** ALL-STAR CLAIMS CONSULTANTS, LLC

**Current Principal Place of Business:**

782 NORHTWEST LEJEUNE ROAD  
SUITE 628  
MIAMI, FL 33126 US

**New Principal Place of Business:**

**Current Mailing Address:**

782 NORTHWEST LEJEUNE ROAD  
SUITE 628  
MIAMI, FL 33126 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FRADE, JORGE A JR  
782 NORHTWEST LEJEUNE ROAD  
SUITE 628  
MIAMI, FL 33126 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: JORGE A. FRADE

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: FRADE, JORGE A JR  
Address: 782 NORTHWEST LEJEUNE ROAD SUITE 628  
City-St-Zip: MIAMI, FL 33126 US

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: JORGE A. FRADE

PRES

10/27/2011

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