2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 20, 2012
Secretary of State

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Entity Name: ASCENDANT CLAIMS SERVICES, LLC

Current Principal Place of Business:

5835 BLUE LAGOON DR
STE 100
MIAMI, FL 33126 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 260550
MIAMI, FL 33126 US

New Mailing Address:

FEI Number: 27-0799975 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CASTRO, LISA M
5835 BLUE LAGOON DR
STE 400
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

HERNANDEZ CASTRO, LISA M
5835 BLUE LAGOON DR
STE 400
MIAMI, FL 33126 US

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: LISA M HERNANDEZ CASTRO 01/20/2012
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: PREMIER RISK MANAGEMENT, LLC
Address: P O BOX 260546
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 Statues.

SIGNATURE: PREMIER RISK MANAGEMENT, LLC MGRM 01/20/2012
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date