

**2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Feb 25, 2010  
Secretary of State**

DOCUMENT# L09000094688

Entity Name: UNITED CLAIMS SPECIALISTS, LLC

**Current Principal Place of Business:**

1835 E. HALLANDALE BEACH BLVD.  
SUITE 675  
HALLANDALE BEACH, FL 33009

**New Principal Place of Business:**

**Current Mailing Address:**

1835 E. HALLANDALE BEACH BLVD.  
SUITE 675  
HALLANDALE BEACH, FL 33009

**New Mailing Address:**

FEI Number: 27-1031401      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SUISKIND, JOSEPH  
1835 E. HALLANDALE BEACH BLVD.  
SUITE #675  
HALLANDALE BEACH, FL 33009 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: SUISKIND, JOSEPH  
Address: 1835 E HALLANDALE BEACH BLVD #675  
City-St-Zip: HALLANDALE BEACH, FL 33009

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: JOSEPH SUISKIND      MGR      02/25/2010

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