

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L11000109462

Entity Name: BPCLAIMSADVISORS, LLC

**FILED**  
**Mar 06, 2013**  
**Secretary of State**

## **Current Principal Place of Business:**

7794 HOLIDAY DRIVE  
SARASOTA, FL 34231 US

## **New Principal Place of Business:**

7737 HOLIDAY DRIVE  
SARASOTA, FL 34231 US

## **Current Mailing Address:**

7794 HOLIDAY DRIVE  
SARASOTA, FL 34231 US

## **New Mailing Address:**

7737 HOLIDAY DRIVE  
SARASOTA, FL 34231 US

FEI Number: 58-9968785

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BOHACK, WILLIAM C  
7794 HOLIDAY DRIVE  
SARASOTA, FL 34231 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: WILLIAM C BOHACK

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BOHACK, WILLIAM C  
Address: 7794 HOLIDAY DRIVE  
City-St-Zip: SARASOTA, FL 34231

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: WILLIAM C BOHACK

MR

03/06/2013

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