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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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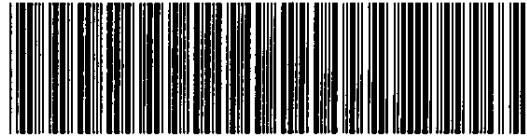
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan SEP - 8 2010

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Duvera Billing Services, LLC dba Palomar Associates
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed Affidavit by Foreign Limited Liability Company to Change Manager(s) or Managing Member(s) and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

April Thompson

Name of Person

Duvera Billing Services

Firm/Company

1910 Palomar Point Way Ste 101

Address

Carlsbad, CA 92008

City/State and Zip Code

april.thompson@duvera.com

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

For further information concerning this matter, please call:

April Thompson

Name of Person

at (760)

602-5000 ext 1102

Area Code and 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

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

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**AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY
TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Duvera Billing Services, LLC dba Palomar Associates.

2. This entity was formed under the laws of: California.

3. This entity was authorized to transact business in Florida on 8/4/2006
and its Florida document/registration number is CCA0900553.

4. The name and address of each manager or managing member is as follows:

Title:
"MGR" = Manager
"MGRM" = Managing Member

Name and Address:

Member

Scott Vertrees
1910 Palomar Point Way Ste 101
Carlsbad, CA 92008

Member

Howard Koenig
1910 Palomar Point Way Ste 101
Carlsbad, CA 92008

Member

Glen Stein
2063 NW 19th Way
Boca Raton, FL 33431

Required Signature: 
Signature of Manager, Managing Member or Member

Filing Fee: \$25