

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000002231

FILED
Jan 30, 2012
Secretary of State

Entity Name: BUREAU OF RECOVERY LLC

Current Principal Place of Business:

1813 E. DYER ROAD
411
SANTA ANA, CA 92705

New Principal Place of Business:

7700 IRVINE CENTER DRIVE
825
IRVINE, CA 92618

Current Mailing Address:

1813 E. DYER ROAD
411
SANTA ANA, CA 92705

New Mailing Address:

7700 IRVINE CENTER DRIVE
825
IRVINE, CA 92618

FEI Number: 33-0991196

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: VAHID, FARSHID DANNY
Address: 7700 IRVINE CENTER DRIVE, #825
City-St-Zip: IRVINE, CA 92618

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: FARSHID DANNY VAHID

MGR

01/30/2012

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