2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 25, 2011
Secretary of State

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Entity Name: RECOVERY MANAGEMENT, LLC

Current Principal Place of Business:

400 S. 4TH STREET
3RD FLOOR
LAS VAGAS, NV 89101

New Principal Place of Business:

3321 N. BUFFALO DRIVE
SUITE 200
LAS VAGAS, NV 89129

Current Mailing Address:

400 S. 4TH STREET
3RD FLOOR
LAS VAGAS, NV 89101

New Mailing Address:

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

Name and Address of Current Registered Agent:

KLINGSBERG, JORDAN L
2101 CORPORATE BLVD STE 107
BOCA RATON, FL 33431 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: SMITH, STUART P
Address: 400 S. 4TH STREET, 3RD FLOOR
City-St-Zip: LAS VAGAS, NV 89101

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: STUART P. SMITH MGR 01/25/2011

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