

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M11000004137

FILED
Apr 17, 2012
Secretary of State

Entity Name: ALVAREZ & MARSAL INSURANCE ADVISORY SERVICES, LLC

Current Principal Place of Business:

600 LEXINGTON AVENUE, 6TH FLOOR
NEW YORK, NY 10022

New Principal Place of Business:

Current Mailing Address:

600 LEXINGTON AVENUE, 6TH FLOOR
NEW YORK, NY 10022

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **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: ALVAREZ, ANTONIO C II
Address: 600 LEXINGTON AVENUE, 6TH FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: MGR
Name: MARSAL, BRYAN P
Address: 600 LEXINGTON AVENUE, 6TH FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: MGR
Name: MCDERMOTT, JAMES
Address: 600 LEXINGTON AVENUE, 6TH FLOOR
City-St-Zip: NEW YORK, NY 10022

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: CHRISTINE FIORE

MGR

04/17/2012

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