## **2003 LIMITED LIABILITY COMPANY**

## **UNIFORM BUSINESS REPORT (UBR)**

## DOCUMENT # M9700000177

1. Entity Name

REINSURANCE SOLUTIONS INTERNATIONAL, L.L.C.



## **FILED** Mar 04, 2003 8:00 am Secretary of State

212-323-1790 Daytime Phone #

03-04-2003 90156 036 \*\*\*\*50.00

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Principal Pla	ce of Business	Mailing Address		•	·				
Wo logan square Hiladelphia pa 19103		TWO LOGAN SQUARE							
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Principal Place of Business     Suite, Apt. #, etc.		3. Mailing Address	, -						
		Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES			
City & Stat	te	City & State			4. FEI Number	23-281957	7		Applied For Not Applicabl
Zip	Country	Zip	Count	гу	5. Certificate of	Status Desired		\$5.00 A	dditional
6. Name and Address of Current Registered Age					7. Name and Ad	dress of New R	egistered .		
ĊТ	CODDODATION SYSTEM	·	ł	Name		,			
-C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324			- ` -	Street Address (P.O. Box Number is Not Acceptable)					
160	₹ \$	•	. [						
	•		1	City			FL	Zip Co	de
8. The above	named entity submits this sta	atement for the purpose of changing i	ts registered	d office or registe	ered agent, or both, in	the State of Flo	rida. I am f	amiliar with	. and accept
пе орндат	ions of registered agent.			-	•				, and absorpt
SIGNATURE .	Signature, typed or printed name of regit	stered agent and title if applicable. (NO	TF: Remistered A	Accent signature recovire	d when reinstating)		DATE		
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REQUIF Scott Goodell, Manager 2/26/03