

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000029895

Entity Name: NATIONWIDE CLAIMS ADJUSTERS, LLC.

Current Principal Place of Business:

7555 SW 29 STREET
MIAMI, FL 33155

Current Mailing Address:

P.O. BOX 558472
MIAMI, FL 33255 US

FEI Number: 20-4545547

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SANTANA, JAVIER
7555 SW 29 STREET
MIAMI, FL 33155 US

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

Authorized Person(s) Detail :

Title	MGRM	Title	S
Name	SANTANA, JAVIER	Name	SANTANA, NOELIA C
Address	P O BOX 558742	Address	P O BOX 558742
City-State-Zip:	MIAMI FL 33255	City-State-Zip:	MIAMI FL 33255

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JAVIER SANTANA

OWNER

03/25/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date