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: CHARLOTTE GOODSON

SIGNATURE: Electronic Signature of Registered Agent

Authorized Person(s) Detail :

32413

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.

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000065370

Entity Name: FLORIDA CLAIMS MEDIATION SERVICES, LLC

Current Principal Place of Business:

22510 B FRONT BEACH ROAD PANAMA CITY BEACH, FL 32413

Current Mailing Address:

201 COX CREEK PKWY S FLORENCE, AL 35630 US

FEI Number: 20-5124170

Name and Address of Current Registered Agent:

GOODSON, CLIFF 22510B FRONT BEACH ROAD PANAMA CITY BEACH, FL 32413 US

Certificate of Status Desired: No

03/08/2016

Date

Date

FILED Mar 08, 2016 Secretary of State CC9444467962

Electronic Signature of Signing Authorized Person(s) Detail

VICE PRESIDENT