

**2018 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000074413

**Entity Name:** MY FLORIDA CLAIM SERVICES, LLC

**Current Principal Place of Business:**

4517 NW 51ST STREET  
COCONUT CREEK, FL 33073

**Current Mailing Address:**

4517 NW 51ST STREET  
COCONUT CREEK, FL 33073 US

**FEI Number:** 27-1855322

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SPIEGEL & UTRERA, P.A.  
1840 CORAL WAY  
MIAMI, FL 33145 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:** JOSEPH A YOUNG

10/30/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title CEO  
Name YOUNG, JOSEPH A  
Address 4517 NW 51ST STREET  
City-State-Zip: COCONUT CREEK FL 33073

*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:** JOSEPH A YOUNG

CEO

10/30/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date