

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000099190

Entity Name: CLAIM CONSULTING, LLC.

Current Principal Place of Business:

8202 NW 41ST STREET
CORAL SPRINGS, FL 33065

Current Mailing Address:

8202 NW 41ST STREET
CORAL SPRINGS, FL 33065

FEI Number: 90-0757609

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NEBRASKY, SCOTT M
8202 NW 41ST STREET
CORAL SPRINGS, FL 33065 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
Name NEBRASKY, SCOTT M
Address 8202 NW 41ST STREET
City-State-Zip: CORAL SPRINGS FL 33065

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: SCOTT M NEBRASKY

REGISTERED AGENT

09/16/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date