

**2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M20000001595

**Entity Name:** INDEPENDENCE CAPITAL RECOVERY, LLC

**Current Principal Place of Business:**

6225 SHERIDAN DR STE 203  
WILLIAMSVILLE, NY 14221

**Current Mailing Address:**

6225 SHERIDAN DR STE 203  
WILLIAMSVILLE, NY 14221 US

**FEI Number: 84-3986018**

**Certificate of Status Desired: No**

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

NRAI SERVICES, INC.  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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            MBR  
Name            PRAWEL, JAMES  
Address        6225 SHERIDAN DR STE 203  
City-State-Zip: WILLIAMSVILLE NY 14221

*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: JAMES PRAWEL**

**MEMBER**

**03/05/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date