

LD2000005330

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

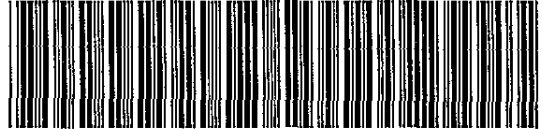
(Business Entity Name)

(Document Number)

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2003 APR -9 AM 9:52  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

J. BRYAN APR 10 2003

**A R E A**


**Auto Repair Estimate Advisors LLC  
1263 10th Avenue  
Lake Park, FL 33403  
561.472.8400 Main  
1.866.439.8400 Toll-Free  
561.472-8401 Fax**

April 4, 2003

Division of Corporations  
P.O. Box 6327  
Tallahassee, Fl 32314

Ref: Doc # L02000005330

Attached please find a check and a Request of Change of Registered Office and Registered Agent for Auto Repair Estimate Advisors, LLC. Please Contact me at 561-472-8400, ext 115 to resolve any problems. Thank You.

Sincerely,  
  
A.J. Dalbon

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TALLAHASSEE, FLORIDA

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR  
BOTH FOR LIMITED LIABILITY COMPANY**

*Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the limited liability company is: AUTO REPAIR ESTIMATE ADVISORS, LLC.
2. The mailing address of the limited liability company is : 1263 - 10<sup>th</sup> STREET,  
LAKE PARK, FL 33403

MARCH 5, 2002  
3. Date of filing/registration in Florida

LA20000005330  
4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

ANTHONY MC HALE  
Name  
507 FLAGLER BOULEVARD  
Address  
LAKE PARK, FL 33403  
City, State and Zip

6. The name and address of the new registered agent and/or office:

ANTHONY J. DALBON  
Name  
1263 10<sup>th</sup> STREET  
Florida street address (P.O. Box NOT acceptable)  
LAKE PARK FL 33403  
City, State and Zip

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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Michael Munson  
(Signature of a member or authorized representative of a member)

MICHAEL M. MUNSON  
(Printed or typed name of signee)

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

Anthony J. Dalbon  
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314