

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000064154

FILED
May 10, 2008
Secretary of State

Entity Name: ACCURATE DAMAGE APPRAISERS LLC

Current Principal Place of Business:

4636 ROTHSCHILD DRIVE
CORAL SPRINGS, FL 33067 US

New Principal Place of Business:

Current Mailing Address:

4636 ROTHSCHILD DRIVE
CORAL SPRINGS, FL 33067 US

New Mailing Address:

FEI Number: 20-5097864 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

JIMENEZ, ARIEL G
4636 ROTHSCHILD DRIVE
CORAL SPRINGS, FL 33067 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: ARIEL JIMENEZ

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: JIMENEZ, ARIEL G
Address: 4636 ROTHSCHILD DRIVE
City-St-Zip: CORAL SPRINGS, FL 33067 US

Title: MGRM () Delete
Name: MASTERS, CRAIG P
Address: 8630 NW 45TH COURT
City-St-Zip: LAUDERHILL, FL 33351 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: ARIEL JIMENEZ

MR.

05/10/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date