

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000039913

**FILED**  
**Mar 12, 2012**  
**Secretary of State**

**Entity Name:** UNITED DAMAGE ADJUSTERS LLC

**Current Principal Place of Business:**

2221 N.E. 164TH STREET  
SUITE # 318  
NORTH MIAMI BEACH, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

2221 N.E. 164TH STREET  
SUITE # 318  
NORTH MIAMI BEACH, FL 33160

**New Mailing Address:**

**FEI Number:** 27-2337436

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FENSTERSZAUB, MARK  
2221 N.E. 164TH STREET  
SUITE # 318  
NORTH MIAMI BEACH, FL 33160 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: FENSTERSZAUB, MARK  
Address: 2221 N.E. 164TH STREET  
City-St-Zip: NORTH MIAMI BEACH, FL 33160

I hereby 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: MARK FENSTERSZAUB

MGR

03/12/2012

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