## P04000146443

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

13/15/06

## **COVER LETTER**

TO: Amendment Section Division of Corporations	**	
SUBJECT: REMODELING & MORE INC (Name of Corporati	ion)	
DOCUMENT NUMBER: 90400146443		
The enclosed Statement of Change of Registered Office/Agent	and fee are submitted for filing.	
Please return all correspondence concerning this matter to the	following:	
REIN JAAKSON (Name of Contact Pe	rson)	
REMODELING & M ORE INC (Firm/Company)		
1015 W NEWPORT CENTER DR 107 (Address)		
DEERFIELD BEACH FLORIDA 33442 (City/State and Zip Code)		
For further information concerning this matter, please call:		
REIN JAAKSON at (	954 ) 427 1540 Area Code & Daytime Telephone Number)	
Enclosed is a \$35.00 check made payable to the Department of State.		
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

STATEMENT OF CHANGE OF REGISTERED OF FOR CORPOR	FFICE OR REGISTERED ANG OF CORPORATIONS	
Pursuant to the provisions of sections 607.0502, 617.0502, statement of change is submitted for a corporation organizin order to change its registered office or registered.	ed under the laws of the State of FLORIDA 4: 49	
1. The name of the corporation: REMODELING & MO	RE INC	
2. The principal office address: 1015 W NEWPORT CE 33442	ENTER DRIVE 107, DEERFIELD BEACH, FL	
3. The mailing address (if different):		
4. Date of incorporation/qualification: 2004	Document number: P0400146443	
5. The name and street address of the current registered age Florida Department of State:	ent and registered office on file with the	
MICHAEL HAMAWAY		
500 E BROWARD BLVD		
FORT LAUDERDALE FLORI	DA 33310	
6. The name and street address of the new registered agent (if changed):	(if changed) and /or registered office	
REIN JAAKSON		
1015 W NEWPORT CENTE	R DR 107	
(P.O. Box NOT acceptable)	2449	
DEERFIELD BEACH, FL 33		
The street address of its registered office and the street as changed will be identical.	ddress of the business office of its registered agent,	
Such change was authorized by resolution duly adopted authorized by the poard, or the corporation has been not		
(Signature of an efficer or director)	REIN JAAKSON (Printed or typed name and title)	
I hereby accept the appointment as registered agent and I further agree to comply with the provisions of all status of my duties, and I am familiar with and accept the oblig document is being filed merely to reflect a change in the corporation has been notified in writing of this change.		
#	08/02/06	
(Signature of Registered Agent)	(Date)	
If signing on behalf of an entity:		
MICHAEL HAMAWAY (Typed or Printed Name)		

Make checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
CR2E045 (8/05)

\* \* \* FILING FEE: \$35.00 \* \* \*