

P07000063566

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

12/14/11

RAC

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DAMAGE EXPERTS, INC
Name of Corporation

DOCUMENT NUMBER: P07000063566

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:

TIBOR PINTER

Name of Contact Person

DAMAGE EXPERTS, INC

Firm/Company

7450 SAN CLEMENTE PL.

Address

BOCA RATON FL 33433

City/State and Zip Code

TIBOR @ DAMAGE EXPERTS.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TIBOR PINTER

Name of Contact Person

at (561) 809-6881

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 OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: DAMAGE EXPERTS INC.
2. The principal office address: 7450 SAN CLEMENTE PL.
BOCA RATON FL 33433
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 05/29/07 Document number: P07000063566
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

TIBOR PINTER
9370 SW 61ST WAY #C
BOCA RATON FL 33428

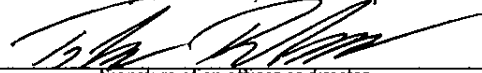
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

TIBOR PINTER
7450 SAN CLEMENTE PL.
P.O. Box NOT acceptable
BOCA RATON FL 33433

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TALLAHASSEE, FLORIDA

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

TIBOR PINTER / PRESIDENT
Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


Signature of Registered Agent

12/10/11
Date

If signing on behalf of an entity:

DAMAGE EXPERTS INC
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)