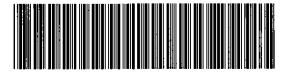
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(Requestor's Name)
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16-27-11

COVER LETTER

Division of Corporations
SUBJECT: ADJUSTING & INSPECTION SERVICES INC. Name of Corporation
DOCUMENT NUMBER: P07000//2/88
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:
OLIN SMITH Name of Contact Person
Name of Contact Person
Firm/Company
9608 NW 49th STREET
Address
SUNRISE FL 33351 City/State and Zip Code
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
COLIN SMITH at (954) 257 0375 Name of Contact Person 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: ADJUSTING & INSPECTION SERVICES, INC.	
2. The principal office address: 9608 NW 49 TREET SUNRISE FL 33351	
SUNRISE FL 33351	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 10-11-07 Document number: P070001/2/88	
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)	
EVERETT A SMITH POLE TO	
III N. PINE ISCAND RD. SUITE 105 2	N
PLANTATION, FL 33324	Ö
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	j
PREMIER FINANCIAL SERVICES GRP INC	
8495 W. Commercial Bus P.O. Box NOT acceptable TAMARAC FL 33351	٠.
TAMARAC FL 33351	
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.	
Humissians Cours SMITH PRESIDENT Printed or typed name and title	T
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 6/21/11	
If signing on behalf of an entity:	
CLAUDE TURNBULL	
Typed or Printed Name	1

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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