2014 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P11000059347

Entity Name: XTREME CHIP & DENT REPAIR, INC.

FILED Apr 01, 2014 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

13383 TEMPLE BLVD. 8560 NW 51 CT

WEST PALM BEACH, FL 33412 US LAUDERHILL, FL 33351 US

Current Mailing Address: New Mailing Address:

13383 TEMPLE BLVD 8560 NW 51 CT

WEST PALM BEACH, FL 33412 US LAUDERHILL, FL 33351 US

FEI Number: 45-4424959 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PITTER, CARL S
7447 NORTH WEST 57TH STREET
TAMARAC, FL 33319 US
GORDON, DERRICK R
5612 PEMBROKE ROAD SUITE B
HOLLYWOOD, FL 33023 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: DERRICK GORDON 04/01/2014

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: FRANCOIS, DOMINIQUE S

Address: 8560 NW 51 CT

City-St-Zip: LAUDERHILL, FL 33351 US

Title: T

Name: FRANCOIS, DOMINIQUE S

Address: 8560 NW 51 CT

City-St-Zip: LAUDERHILL, FL 33351 US

Title: S

Name: FRANCOIS, DOMINIQUE S

Address: 8560 NW 51 CT

City-St-Zip: LAUDERHILL, FL 33351 US

Title:

Name: FRANCOIS, DOMINIQUE S

Address: 8560 NW 51 CT

City-St-Zip: LAUDERHILL, FL 33351 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DOMINIQUE S FRANCOIS P 04/01/2014