P98000049267

(Requestor's Name)
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SECRETARY OF STATE TACLAHASSEE, FLORIO

Change 03/13/04 D

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Ulfimate Remodalius, Inc. (Name of corporation)
DOCUMENT NUMBER: \$\Phi 94 0000 49267
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:
Michael Sands (Name of person)
Ulfimoto Remodeling, Frac (Name of firm/company)
9230 A East Acghland Pinos Dr.
Poly Beh Goldogs FL 33418 (City/state and zip code)
For further information concerning this matter, please call:
McCLOS Sounds at (501) 299-020 (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 409 E. Gaines Street Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 6, 2004

MICHAEL SANDS ULTIMATE REMODELING, INC. 9230 A EAST HIGHLAND PINES DR. PALM BEACH GARDENS, FL 33418

SUBJECT: ULTIMATE REMODELING, INC.

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Ref. Number: P98000049267

We have received your document for ULTIMATE REMODELING, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Darlene Connell Document Specialist

Letter Number: 604A00030977

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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 Flest a Ce in order
to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Ultimore Remodeling, Inc.
2. The principal office address: 4152 Indiane Monce Ct.
Ilmf C-1 Soussta, FL 39234
3. The mailing address (if different): PO BOT 7/89 Supplies, FL 3346
4. Date of incorporation/qualification: 61-98 Document number: 198000 4926
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Michael E. Souds
9230 A East Highland Pinos Dr.
Polan Boh Gordens, FL 33418 = 2
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Derman L. Raphael
4152 Indeposition of Ct. Unit C-1 75 F
Sovosofo, FL 34234
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 ornicar distinction) Place (Carpet) Signature and title Signature and Signature and Signature and Signature and Signature and Si
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.
(Bignature of Registered Agent) (Date)
If signing on behalf of amentity:
(Capacity)
(Typed or Printed Name) (Capacity)

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