2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F05000002718

Entity Name: COLLATERAL RISK SOLUTIONS INC.

FILED Oct 08, 2007 Secretary of State

Littley Ital	ile. COLLAIT	LRAL RISK SOLUTIONS, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
STE. 100	SAN DIEGO D O, CA 92108	R.			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
STE. 100	SAN DIEGO D O, CA 92108	R.			
FEI Number: 43-1952332		FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
1201 HAYS TALLAHAS The above in the State	SSTREET SSEE, FL 323	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
Electronic Signature of Registered Agent			ent	Date	
Election Car		3(2)(b), F.S., the corporation did no g Trust Fund Contribution (). TORS:	•	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CPS () MEREDITH, JO 8989 RIO SAN SAN DIEGO, C	DIEGO DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VTV () NAMEY, EDWA 8989 RIO SAN SAN DIEGO, C	DIEGO DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: EDWARD D NAMEY, II VTV 10/08/2007