

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

**FILED
Apr 06, 2006
Secretary of State**

DOCUMENT# L03000031722

Entity Name: FAST CREDIT LLC

Current Principal Place of Business:

2520 SW 22 ST, #339, STE. 2
MIAMI, FL 33145

New Principal Place of Business:

Current Mailing Address:

2520 SW 22 ST, #339, STE. 2
MIAMI, FL 33145

New Mailing Address:

FEI Number: 05-0583348 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

PIEDRA, AVRELIO A
780 N.W. LEJEUNE RD #516
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

PIEDRA, AVRELIO A
9100 SOUTH DADELAND BLVD
STE 912
MIAMI, FL 33156 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: AURELIO A PIEDRA

04/06/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: AUTO EASY FINANCE IN, C.
Address: 2520 SW 22 ST, #339, STE. 2
City-St-Zip: MIAMI, FL 33145

Title: MGRM () Delete
Name: REVOCABLE TRUST OF H, ORACIO E ALONS O
Address: 9601 COLLINS AVE T3
City-St-Zip: MIAMI BEACH, FL 33154

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: HORACIO ALONSO

MGR

04/06/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date