

# 2004 LIMITED LIABILITY COMPANY REINSTATEMENT

**FILED**  
**Oct 26, 2004**  
**Secretary of State**

DOCUMENT# M01000000864

**Entity Name:** ILS TITLE AGENCY, LLC

**Current Principal Place of Business:**

C/O INTEGRATED LOAN SERVICES, INC.  
31 INWOOD RD.  
ROCKY HILL, CT 06067

**New Principal Place of Business:**

**Current Mailing Address:**

C/O INTEGRATED LOAN SERVICES, INC.  
31 INWOOD RD.  
ROCKY HILL, CT 06067

**New Mailing Address:**

**FEI Number:** 59-3720558      **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:**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: HOWLETT III, LESLIE J  
Address: 31 INWOOD RD  
City-St-Zip: ROCKY HILL, CT 06067

**ADDITIONS/CHANGES:**

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 Section 119.07(3)(i), 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: LESLIE J. HOWLETT III

MGRM

10/26/2004

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