

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 JUN 23 PM 1:55

DOCUMENT # M01000002141

1. Limited Liability Company's Name

AAA Mortgage Exchange, LLC

2. Principal Office Address

179 E. Maple

Suite, Apt. #, etc.

City & State

Troy, MI

Zip

48083

Country

U.S.A.

3. Mailing Office Address

179 E. Maple

Suite, Apt. #, etc.

City & State

Troy, MI

Zip

48083

Country

U.S.A.

4. State/Country of Formation

Michigan

**5. Date Organized or Qualified
To Do Business in Florida**

9-19-01

6. FEI Number

38-3622911

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐

\$5.00 Additional Fee required
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name

Florida Filing & Search Services, Inc.

Street Address (P.O. Box Number is Not Acceptable)

1333 North Duval Street

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32302

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of
Registered Agent

Robbie P. Hodge
REGISTERED AGENT MUST SIGN

Date

5/18/04

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	Ajay Murthy	179 E. Maple	Troy, MI 48083
MGRM	Rachana Murthy	179 E. Maple	Troy, MI 48083

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06/23/04--01061--002 **250.00

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of
Managing Member/Manager

Ajay Murthy
Ajay Murthy

Date

6/17/04

Daytime Phone# (248) 528-1234

Typed or printed name of signing Managing Member/Manager

Ajay Murthy

CR2E041 (10/02)