

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000096734

Entity Name: QUICK CLOSE MORTGAGE, INC.

FILED
Oct 14, 2006
Secretary of State

Current Principal Place of Business:

4585 N DIXIE HWY
POMPANO BCH, FL 33064

New Principal Place of Business:

Current Mailing Address:

PO BOX 5044
FT LAUDERDALE, FL 33310

New Mailing Address:

FEI Number: 65-1128121

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FABRE, GAELLEN
4170 INVERRARY BLVD #111
FT LAUDERDALE, FL 33319 US

Name and Address of New Registered Agent:

FABRE, GAELLEN T
4585 NORTH DIXIE HWY.
POMPANO BEACH, FL 33310 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: GAELLEN T. FABRE

10/14/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FABRE, GAELLEN
Address: 4170 INVERRARY DR #111
City-St-Zip: LAUDERHILL, FL 33319

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FABRE, GAELLEN T
Address: 4583 NORTH DIXIEHWY.
City-St-Zip: POMPANO BEACH, FL 33064

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 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: GAELLEN T. FABRE

PRES

10/14/2006

Electronic Signature of Signing Officer or Director

Date