2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000036809

City-St-Zip: BOYNTON BEACH, FL 33425

Entity Name: FIDELITY NATIONAL TRUST LLC

FILED Mar 16, 2009 Secretary of State

Current P	rincipal Place of Business:	New Principal Pl	New Principal Place of Business:	
2421 SPRUCE AVE			3 HARBOUR DRIVE NORTH	
SUITE 100 WEST PALM BEACH, FL 33407			SUITE 100 BOYNTON BEACH, FL 33435	
Current N	lailing Address:	New Mailing Add	New Mailing Address:	
P. O. BOX BOYNTON	413 NBEACH, FL 33425			
	: 20-4699647 FEI Number Applied For (ce with s. 607.193(2)(b), F.S., the limited liabilit			
Name and Address of Current Registered Agent:		t: Name and Addre	Name and Address of New Registered Agent:	
3 HARBÓI BOYNTON	IICHOLAS JR DRIVE N N BEACH, FL 33435 US		though office and according to the state of	
	named entity submits this statement for e of Florida.	the purpose of changing its regis	tered oπice or registered agent, or botr	
SIGNATUI	RE: NICHOLAS ARSALI			
	Electronic Signature of Registered	d Agent	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM () Delete ARSALI, NICHOLAS P. O. BOX 413 BOYNTON BEACH, FL 33425	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete ARSALI, AFSOON P. O. BOX 413 BOYNTON BEACH, FL 33425	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	MGRM () Delete ARSALI, ANTHONY	Title: Name:	() 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 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.

City-St-Zip:

SIGNATURE: NICHOLAS ARSALI MGR 03/16/2009