## 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000027008

Entity Name: 1ST SIGNATURE LENDING, LLC

**FILED** Feb 23, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

3211 WALTON WAY 130-D PROFESSIONAL COURT KOKOMO, IN 46902

LAFAYETTE, IN 47905

**Current Mailing Address: New Mailing Address:** 

P O BOX 80097 3211 WALTON WAY

KOKOMO, IN 46902 INDIANAPOLIS, IN 46280

FEI Number: 01-0737466 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

JOHNSON, CURT 770 SOUTH PALM AVENUE 804 SARASOTA, FL 34236 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: CURT JOHNSON

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGR Title: (X) Change ( ) Addition () Delete

JOHNSON, MARTHA A JOHNSON, MARTHA A Name: Name: Address: 3211 WALTON WAY Address: P. O. BOX 80097 City-St-Zip: KOKOMO, IN 46902 City-St-Zip: INDIANAPOLIS, IN 46280

Title: MGR () Delete Title: MGR (X) Change ( ) Addition

Name: OLINGER, JOHN Name: JOHNSON, MICHAEL Address: 1122 RESERVE WAY Address: P. O. BOX 80097 City-St-Zip: INDIANAPOLIS, IN 46220 City-St-Zip: INDIANAPOLIS, IN 46280

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.

SIGNATURE: MICHAEL JOHNSON 02/23/2008