

2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000032618

Entity Name: REVERSE MORTGAGE LLC

FILED
Jun 29, 2005
Secretary of State

Current Principal Place of Business:

4160 PACKARD AVE
SAINT CLOUD, FL 34772

New Principal Place of Business:

Current Mailing Address:

4160 PACKARD AVE
SAINT CLOUD, FL 34772

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MILLER, WYNN E
4160 PACKARD AVE
SAINT CLOUD, FL 34772 US

Name and Address of New Registered Agent:

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: WYNN MILLER

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MILLER, WYNN E
Address: 4160 PACKARD AVE
City-St-Zip: SAINT CLOUD, FL 34772

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: WYNN MILLER

MGR

06/29/2005

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