

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000003951

Entity Name: IVY LENDING LLC

FILED
Feb 17, 2009
Secretary of State

Current Principal Place of Business:

201 S. NARCISSUS AVENUE UNIT 1005
WEST PALM BEACH, FL 33401

New Principal Place of Business:

19214 LOXAHATCHEE RIVER RD.
JUPITER, FL 33458

Current Mailing Address:

201 S. NARCISSUS AVENUE UNIT 1005
WEST PALM BEACH, FL 33401

New Mailing Address:

4114 NORTHLAKE BLVD
200
PALM BEACH GARDENS, FL 33410

FEI Number: 20-0663796 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

WESTON, DANTE MGRM
201 S. NARCISSUS AVENUE UNIT 1005
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

WESTON, DANTE MGRM
19214 LOXAHATCHEE RIVER RD.
JUPITER, FL 33458 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: DANTE WESTON

02/17/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MR () Delete
Name: WESTON, DANTE W MGRMN
Address: 201 S. NARCISSUS AVE UNIT 1005
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES:

Title: MR (X) Change () Addition
Name: WESTON, DANTE W MGRMN
Address: 19214 LOXAHATCHEE RIVER RD.
City-St-Zip: JUPITER, FL 33458

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: DANTE WESTON

MGR

02/17/2009

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