

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000005948

FILED
Mar 22, 2006
Secretary of State

Entity Name: FLORIDIAN TITLE COAST TO COAST LLC

Current Principal Place of Business:

1939 TYLER STREET
HOLLYWOOD, FL 33020

New Principal Place of Business:

2665 EXECUTIVE PARK DRIVE
SUITE 3
WESTON, FL 33331

Current Mailing Address:

1939 TYLER STREET
HOLLYWOOD, FL 33020

New Mailing Address:

2665 EXECUTIVE PARK DRIVE
SUITE 3
WESTON, FL 33331

FEI Number: 20-0642520

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERRY, RAY T
1939 TYLER STREET
HOLLYWOOD, FL 33020 US

Name and Address of New Registered Agent:

FARMER, GARY
2665 EXECUTIVE PARK DRIVE
SUITE 3
WESTON, FL 33331 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: GARY FARMER

03/22/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BERRY, RAY T
Address: 1939 TYLER STREET
City-St-Zip: HOLLYWOOD, FL 33020

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MM (X) Change () Addition
Name: BERRY, RAY T
Address: 1939 TYLER STREET
City-St-Zip: HOLLYWOOD, FL 33020

Title: MGRM () Change (X) Addition
Name: FARMER, GARY M JR
Address: 2665 EXECUTIVE PARK DRIVE
City-St-Zip: SUITE 3, FL 33331

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 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: RAY T BERRY

MM

03/22/2006

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