2009 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Jan 12, 2009
Secretary of State

DOCUMENT# L04000029174

Entity Name: INTERCOASTAL MORTGAGE NETWORK, LLC

Current Principal Place of Business:

2511 W MOODY BLVD
FLAGLER BEACH, FL 32136 US

New Principal Place of Business:

25 LOUISBURG LANE
PALM COAST, FL 32137 US

Current Mailing Address:

2511 W MOODY BLVD
FLAGLER BEACH, FL 32136 US

New Mailing Address:

P.O. BOX 354605
PALM COAST, FL 32135 US

FEI Number: 55-0863739 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCALF, CHRISTOPHER J
25 LOUISBURG LANE
PALM COAST, FL 32137 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: CHRISTIOPHER J SCALF

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: SCALF, CHRISTOPHER J
Address: 25 LOUISBURG LANE
City-St-Zip: PALM COAST, FL 32137 US

Title: MGRM (X) Delete
Name: SCALF, NANCY
Address: 25 LOUISBURG LANE
City-St-Zip: PALM COAST, FL 32137 US

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: CHRISTOPHER J SCALF MGRM 01/12/2009

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