2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000007533

Entity Name: BUILDERS TITLE GROUP, LLC

FILED Nov 14, 2006 Secretary of State

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

2804 DEL PRADO BLVD., SUITE 106 2503 DEL PRADO BLVD CAPE CORAL, FL 33904

SUITE 503

CAPE CORAL, FL 33904

Current Mailing Address: New Mailing Address:

2804 DEL PRADO BLVD., SUITE 106 2503 DEL PRADO BLVD CAPE CORAL, FL 33904

SUITE 503

CAPE CORAL, FL 33904

ADDITIONS/CHANGES:

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

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: Name and Address of New Registered Agent:

SHAFFER, STEVEN O SHAFFER, STEVEN O 2503 DEL PRADO BLVD 2804 DEL PRADO BLVD., SUITE 106

CAPE CORAL, FL 33904 SUITE 503

CAPE CORAL, FL 33904 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: STEVEN O. SHAFFER 11/14/2006

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

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

SHAFFER, STEVEN O SHAFFER, STEVEN O Name: Name: Address: 2804 DEL PRADO BLVD., SUITE 106 Address: 2503 DEL PRADO BLVD., SUITE 503

City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip: CAPE CORAL, FL 33904

Title: Title: MGR () Change (X) Addition () Delete Name: Name: SHAFFER, KIMBERLY D

Address: Address: 2503 DEL PRADO BLVD., SUITE 503

City-St-Zip: City-St-Zip: CAPE CORAL, FL 33904

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: STEVEN O. SHAFFER 11/14/2006