

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000032652

Entity Name: MORTGAGE DIRECT, LLC

FILED  
Nov 14, 2007  
Secretary of State

## Current Principal Place of Business:

4808 EVANS AVENUE  
SUITE 206  
FORT MYERS, FL 33901

## New Principal Place of Business:

2503 DEL PRADO BLVD  
SUITE 503  
CAPE CORAL, FL 33904

## Current Mailing Address:

4808 EVANS AVENUE  
SUITE 206  
FORT MYERS, FL 33901

## New Mailing Address:

2503 DEL PRADO BLVD  
SUITE 503  
CAPE CORAL, FL 33904

FEI Number: 20-2619664      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:

SHAFFER, STEVEN O  
4808 EVANS AVENUE  
SUITE 206  
FORT MYERS, FL 33901 US

## Name and Address of New Registered Agent:

SHAFFER, STEVEN O  
2503 DEL PRADO BLVD  
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

11/14/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: P ( ) Delete  
Name: SHAFFER, STEVEN O  
Address: 4808 EVANS AVENUE, SUITE 206  
City-St-Zip: FORT MYERS, FL 33901

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

## ADDITIONS/CHANGES:

Title: P (X) Change ( ) Addition  
Name: SHAFFER, STEVEN O  
Address: 2503 DEL PRADO BLVD  
City-St-Zip: CAPE CORAL, FL 33904

Title: VP ( ) Change (X) Addition  
Name: SHAFFER, KIMBERLY D  
Address: 2503 DEL PRADO BLVD  
City-St-Zip: CAPE CORAL, FL 33904

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: STEVE SHAFFER

P

11/14/2007

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