2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000084224

Entity Name: BENTRUST INSURANCE GROUP, LLC

FILED Mar 14, 2007 Secretary of State

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

999 PONCE DE LEON BLVD. 701 WATERFORD WAY 300

SUITE 719

CORAL GABLES, FL 33134 MIAMI, FL 33126

Current Mailing Address: New Mailing Address:

999 PONCE DE LEON BLVD. 701 WATERFORD WAY

SUITE 719 300

CORAL GABLES, FL 33134 MIAMI, FL 33126

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BAXTER, JEFFREY L CARRERAS, FRANCISCO J 15500 NÉW BARN ROAD 701 WATERFORD WAY 300 SUITE 104

MIAMI LAKES, FL 33014 US MIAMI, FL 33126 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: FRANCISCO J. CARRERAS 03/14/2007

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

() Delete MGRM Title: (X) Change () Addition CARRERAS, FRANCISCO J CARRERAS, FRANCISCO J Name: Name:

Address: 999 PONCE DE LEON BLVD., SUITE 719 Address: 701 WATERFORD WAY, SUITE 300

City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: MIAMI, FL 33126

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: FRANCISCO J. CARRERAS 03/14/2007