FILED Feb 27, 2006 8:00 am Secretary of State

1/3

DOCUMENT # L05000095167 1. Enlity Name THE LOAN GROUP, LLC							01-30-20	06 901 58 0)15 **	
Principal Place of Business 801 NE 367TH STREET 2ND FLOOR NORTH MIAMI BEACH, FL 33162			2ND FLOOR	801 NE 167TH STREET					TO CITA UT	153 1 112 1 1 1 5
Principal Place of Business			3. Mailing Address	3. Mailing Address						
Suite, Apt. #, etc.			Suite, Apt. #, etc.				Chg-LLC	CR2E083 (11/05)	
City & State			City & State				39874			oplied For ot Applicable
Z)p	Country		Zφ			5. Certificate of Status Desired Speak Spe				
			rrent Registered Agent	egiztared Agent Name			d Address of New R	iegistered Ager	n	
20801 BIS	CAYNE B	LPA	ري يور يو جسونيوپيونشد اي ي	الميتواهد هما	Street Addres	s (P.O. Box Num	ber is Not Acceptable	9)	<u> </u>	
SUITE 301 AVENTUR		180-1422								
					City			re l	Zip Cod	
B. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and site it applicable. [NOTE: Registered Agent signature required when refrestating) DATE										
Fi Di	iling Fee i ue by May	ls \$50.00 y 1, 2006					Make check payable to Florida Department of State			
1			MBERS/MANAGERS				ADDITIONS/			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	801 NE 16	R, MICHAEL 67TH STREET MIAMI BEACH, FL	☐ Deletz 33162	NAME STREET				Ц	Change	☐ Addition
TITLE			☐ Detete	Detets TITLE NAME					Change	Addition
NAME STREET AUDRESS CITY-ST-ZIP				STRE	EET ADDRESS '- ST- ZIP			·		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	3.5				E IE IET ADDRESS '-ST-ZIP				Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-7P			Delete			-			Change	Addition
TITLE MANE STREET ADDRESS CITY-ST-ZIP			☐ Deleta					_	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Delitin	CITY	E EET ADORESS 1-ST-ZIP				Change	Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statules. I further certify that the information indicated on this report is true and accurate and that my 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 trusten emprovered to execute this report as required by Chapter 808, Florida Statutes. SIGNATURE: 305-190-9 110										



Division of Corporations

February 3, 2006

THE LOAN GROUP, LLC 801 NE 167TH STREET 2ND FLOOR NORTH MIAMI BEACH, FL 33162

Subject: THE LOAN GROUP, LLC

Reference Number:

L05000095167

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report has not been filed and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/CJ ANNUAL REPORTS SECTION