2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000113464

Entity Name: TRI-COUNTY HOME SAVERS AND INVESTMENTS WEST, LLC

FILED Nov 07, 2007 Secretary of State

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

2100 PONCE DE LEON BLVD. 2600 DOUGLAS RD. SUITE 600

SUITE 1100 CORAL GABLES, FL 33134 CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

2100 PONCE DE LEON BLVD. 2600 DOUGLAS RD

SUITE 600 SUITE 1100

CORAL GABLES, FL 33134 CORAL GABLES, FL 33134

FEI Number: 20-3841563 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: Name and Address of New Registered Agent:

GURIAN, JORGE GURIAN, JORGE 2600 DOUGLAS RD. 2100 PONCE DE LEON BLVD.

SUIE 600 SUITE 1100

CORAL GABLES, FL 33134 US CORAL GABLES, FL 33134 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.

ADDITIONS/CHANGES:

SIGNATURE: JORGE GURIAN 11/07/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

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

BRANDT, CHARLES B BRANDT, CHARLES B Name: Name:

2100 PONCE DE LEON BLVD., STE. 600 Address: 2600 DOUGLAS RD. SUITE 1100 Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134

(X) Change () Addition Title: MGRM () Delete Title: MGRM GONZALEZ, FRANCISCO JR. Name: GONZALEZ, FRANCISCO JR. Name: Address:

2100 PONCE DE LEON BLVD., STE, 600 Address: 2600 DOUGLAS RD. SUITE 1100 City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM () Delete Title: MGRM (X) Change () Addition NEGRON, LUIS A Name: NEGRON, LUIS A Name:

2100 PONCE DE LEON BLVD., STE. 600 2600 DOUGLAS RD. SUITE 1100 Address: Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134

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: CHARLES BRANDT **MGRM** 11/07/2007