

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000000366

FILED
Nov 10, 2009
Secretary of State

Entity Name: UNSECURED SOLUTIONS, LLC

Current Principal Place of Business:

2755 EAST OAKLAND PARKLAND BLVD
301
FT. LAUDERDALE, FL 33306

New Principal Place of Business:

3020 NE 32 AVE
202
FT. LAUDERDALE, FL 33308

Current Mailing Address:

2755 EAST OAKLAND PARKLAND BLVD
301
FT. LAUDERDALE, FL 33306

New Mailing Address:

3020 NE 32 AVE
202
FT. LAUDERDALE, FL 33308

FEI Number: 54-2190802 **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:

NRAI SERVICES, INC.
2731 EXECUTIVE DRIVE, SUITE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

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: THOMAS PIRES

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PIRES, THOMAS
Address: 3020 N.E. 32ND AVE., UNIT 1512
City-St-Zip: FT. LAUDERDALE, FL 33308

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: THOMAS PIRES

OWNE

11/10/2009

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