

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000068161

**FILED**  
**Feb 23, 2010**  
**Secretary of State**

**Entity Name:** TRUST LENDING GROUP, LLC

**Current Principal Place of Business:**

600 SW 99 AVENUE  
PEMBROKE PINES, FL 33025

**New Principal Place of Business:**

**Current Mailing Address:**

600 SW 99 AVENUE  
PEMBROKE PINES, FL 33025

**New Mailing Address:**

**FEI Number:** 20-5173904      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
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:**

MOYA, LESLIE  
600 SW 99 AVENUE  
PEMBROKE PINES, FL 33025      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:** LESLIE MOYA

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** MOYA, LESLIE  
**Address:** 600 SW 99 AVE  
**City-St-Zip:** PEMBROKE PINES, FL 33025

**Title:** MGRM  
**Name:** MARTINEZ, JOSE  
**Address:** 7512 PEMBROKE ROAD  
**City-St-Zip:** MIRAMAR, FL 33023

I hereby 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:** LESLIE MOYA

MGRM

02/23/2010

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