

**2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L07000015194

**FILED**  
**May 12, 2008**  
**Secretary of State****Entity Name:** SERVICING DEVELOPMENT, LLC**Current Principal Place of Business:**7725 NW 146 ST.  
MIAMI LAKES, FL 33016 US**New Principal Place of Business:****Current Mailing Address:**7725 NW 146 ST.  
MIAMI LAKES, FL 33016 US**New Mailing Address:****FEI Number:** 20-8503398**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**REGISTERED AGENT CORPORATE SERVICES, INC.  
806 DOUGLAS ROAD  
SUITE 580  
CORAL GABLES, FL 33134 US**Name and Address of New Registered Agent:**REGISTERED AGENT CORPORATE SERVICES, INC.  
355 ALHAMBRA CIRCLE  
SUITE 801  
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.

SIGNATURE: BETSY PARENTI, ASSIST. SECRETARY

05/12/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: SERVICING INVESTMENT, S, CORP.  
Address: 806 DOUGLAS ROAD, SUITE 580  
City-St-Zip: CORAL GABLES, FL 33134 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: SERVICING INVESTMENT, S, CORP.  
Address: 355 ALHAMBRA CIRCLE, SUITE 801  
City-St-Zip: CORAL GABLES, FL 33134 US

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: MALEK TORBAY, DIR OF SERVICING INVEST. COR

D

05/12/2008

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