

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000080486

FILED
Feb 17, 2009
Secretary of State

Entity Name: FIRST NATIONS FINANCIAL SERVICES GROUP,LLC

Current Principal Place of Business:

2461 S. W. 85TH TERRACE
FT. LAUDERDALE, FL 33324 US

New Principal Place of Business:

2461 S. W. 85TH TERRACE
DAVIE, FL 33324 US

Current Mailing Address:

2461 S. W. 85TH TERRACE
FT. LAUDERDALE, FL 33324 US

New Mailing Address:

2461 S. W. 85TH TERRACE
DAVIE, FL 33324 US

FEI Number: 26-4273907 **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:

RABORG, CHRISTOPHER H
2461 S. W. 85TH TERRACE
FT. LAUDERDALE, FL 33324 US

Name and Address of New Registered Agent:

TIGER, CALVIN L
2461 S. W. 85TH TERRACE
DAVIE, FL 33324 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: CALVIN LEE TIGER

02/17/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: TIGER, CALVIN L
Address: 2461 S. W. 85TH TERRACE
City-St-Zip: FT.LAUDERDALE, FL 33324 US

Title: MGR () Delete
Name: OSCEOLA, MAX THE 3RD
Address: 2461 S. W. 85TH TERRACE
City-St-Zip: FT.LAUDERDALE, FL 33324 US

Title: MGR (X) Delete
Name: RABORG, CHRISTOPHER H
Address: 2461 S. W. 85TH TERRACE
City-St-Zip: FT. LAUDERDALE, FL 33324 US

Title: MGR (X) Delete
Name: DE GALVAO TELES, JOAO
Address: 2461 S. W. 85TH TERRACE
City-St-Zip: FT. LAUDERDALE, FL 33324 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: TIGER, CALVIN L
Address: 2461 S. W. 85TH TERRACE
City-St-Zip: DAVIE, FL 33324 US

Title: MGR (X) Change () Addition
Name: DE GALVAO TELES, JOAO
Address: 2461 S. W. 85TH TERRACE
City-St-Zip: DAVIE, FL 33324 US

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

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: CALVIN LEE TIGER

MGR

02/17/2009

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