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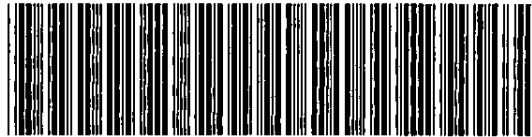
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MORTGAGE CRISIS SOLUTIONS ASSOCIATION, LLC
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DONALD GILLETTE

(Name of Person)

PROPERTY SOLUTIONS SPECIALISTS, INC.

(Firm/Company)

700 S. ROYAL POINCIANA BOULEVARD, SUITE 1020

(Address)

MIAMI, FLORIDA 33166

(City/State and Zip Code)

For further information concerning this matter, please call:

DONALD GILLETTE

(Name of Person)

at (305) 888-8205 X2229

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Mortgage Crisis Solutions Association, LLC

2. (a) Principal office address of limited liability company: 700 S. ROYAL POINCIANA BOULEVARD
(Note: **MUST BE STREET ADDRESS**) SUITE 1020
MIAMI, FLORIDA 33166

(b) Mailing address of limited liability company: 700 S. ROYAL POINCIANA BOULEVARD
(Note: **MAY BE POST OFFICE BOX**) SUITE 1020
MIAMI, FLORIDA 33166

November 14, 2008

3. Date of filing/registration in Florida

L08000031517

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State

Registered Agent: JEFFREY KAISER

Registered Office Address: 700 S. ROYAL POINCIANA BOULEVARD SUITE 1020
MIAMI, FLORIDA 33166

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent: DONALD GILLETTE

NEW Registered Office Address: 700 S. ROYAL POINCIANA BOULEVARD
(**MUST BE FLORIDA STREET ADDRESS**) SUITE 1020
MIAMI, FLORIDA 33166, FL 33166

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Donald Gillette
(Signature of a member or authorized representative of a member)

DONALD GILLETTE
(Printed or typed name of signee)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Donald Gillette
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00