

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000052479

FILED
Oct 07, 2009
Secretary of State

Entity Name: CIRBUS FINANCIAL HOUSING SOLUTIONS, LLC

Current Principal Place of Business:

20283 SR 7, STE. #300
BOCA RATON, FL 33498

New Principal Place of Business:

8601 SURREY LANE
BOCA RATON, FL 33496

Current Mailing Address:

20283 SR 7, STE. #300
BOCA RATON, FL 33498

New Mailing Address:

8601 SURREY LANE
BOCA RATON, FL 33496

FEI Number: **FEI Number Applied For (X)** **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:

LENTS, JOSEPH
20283 SR 7, STE. #300
BOCA RATON, FL 33498 US

Name and Address of New Registered Agent:

LENTS, JOSEPH
8601 SURREY LANE
BOCA RATON, FL 33496 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: JOSEPH LENTS

10/07/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: PRES () Change (X) Addition
Name: LENTS, JOSEPH PRES
Address: 8601 SURREY LANE
City-St-Zip: BOCA RATON, FL 33496

Title: COO () Change (X) Addition
Name: KELMAN, GARY COO
Address: 2101 VISTA PARKWAY
City-St-Zip: WEST PALM BEACH, FL 33411

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: JOSEPH LENTS

PRES

10/07/2009

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