

# **2009 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000099516

**FILED**  
**Oct 01, 2009**  
**Secretary of State**

**Entity Name:** HOME LOAN MOD SQUAD LLC

**Current Principal Place of Business:**

1615 S DOVER ROAD  
DOVER, FL 33527

**New Principal Place of Business:**

**Current Mailing Address:**

1615 S DOVER ROAD  
DOVER, FL 33527

**New Mailing Address:**

FEI Number: 26-3762403      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
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:**

GASKIN, DAVID J SR.  
1615 S DOVER ROAD  
DOVER, FL 33527      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: DAVID J GASKIN SR

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: GASKIN, DAVID J SR.  
Address: 1615 S DOVER ROAD  
City-St-Zip: DOVER, FL 33527

**ADDITIONS/CHANGES:**

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: DAVID J GASKIN SR

MGRM

10/01/2009

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