

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M05000003136

FILED
Oct 10, 2006
Secretary of State

Entity Name: ALLEGIANT MORTGAGE GROUP LLC

Current Principal Place of Business:

5115 PARK CENTER AVENUE, SUITE 150
DUBLIN, OH 43017

New Principal Place of Business:

5115 PARKCENTER AVENUE, SUITE 150
DUBLIN, OH 43017

Current Mailing Address:

5115 PARK CENTER AVENUE, SUITE 150
DUBLIN, OH 43017

New Mailing Address:

5115 PARKCENTER AVENUE, SUITE 150
DUBLIN, OH 43017

FEI Number: 20-1099147

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BREWER, WILLIARD T JR.
7385 FAIRWAY DRIVE APT. 161
MIAMI LAKES, FL 33014 US

Name and Address of New Registered Agent:

RICHTER, JULES J
627 FISHER HAMMOCK ROAD
SEBASTIAN, FL 32958 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: JULES J. RICHTER

10/10/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: COLEMAN, CHRIS
Address: 5115 PARK CENTER AVENUE, SUITE 150
City-St-Zip: DUBLIN, OH 43017

Title: MGRM () Delete
Name: COLEMAN, JOHNSON
Address: 5115 PARK CENTER AVENUE, SUITE 150
City-St-Zip: DUBLIN, OH 43017

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

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

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: JOHNSON, STEFFAN
Address: 5115 PARKCENTER AVENUE, SUITE 150
City-St-Zip: DUBLIN, OH 43017

Title: MGR (X) Change () Addition
Name: RICHTER, TAMMY A
Address: 5115 PARKCENTER AVENUE, SUITE 150
City-St-Zip: DUBLIN, OH 43017

Title: MGR () Change (X) Addition
Name: JOHNSON, LORI M
Address: 5115 PARKCENTER AVENUE, SUITE 150
City-St-Zip: DUBLIN, OH 43017

Title: MGR () Change (X) Addition
Name: RICHTER, GREGORY P
Address: 5115 PARKCENTER AVENUE, SUITE 150
City-St-Zip: DUBLIN, OH 43017

I hereby certify that the information supplied with this filing does not qualify for the 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: STEFFAN V. JOHNSON

MGRM

10/10/2006

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