

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M06000000967

**FILED**  
**Oct 16, 2007**  
**Secretary of State**

**Entity Name:** BETTER HOMES MORTGAGE, LLC

**Current Principal Place of Business:**

725 BRANCH AVE.  
SUITE 209  
PROVIDENCE, RI 02907

**New Principal Place of Business:**

725 BRANCH AVE.  
SUITE 209  
PROVIDENCE, RI 02904

**Current Mailing Address:**

725 BRANCH AVE.  
SUITE 209  
PROVIDENCE, RI 02907

**New Mailing Address:**

725 BRANCH AVE.  
SUITE 209  
PROVIDENCE, RI 02904

**FEI Number:** 20-2346210      **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:**

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE, SUITE 4  
WESTON, FL 33331      US

**Name and Address of New Registered Agent:**

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:** STEPHEN S. GERMANI

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR      ( ) Delete  
**Name:** GERMANI, STEPHEN S  
**Address:** 1040 MINERAL SPRING AVE.  
**City-St-Zip:** N. PROVIDENCE, RI 02904

**Title:** MGR      ( ) Delete  
**Name:** GERMANI, KERRI A  
**Address:** 1040 MINERAL SPRING AVE.  
**City-St-Zip:** N. PROVIDENCE, RI 02904

**ADDITIONS/CHANGES:**

**Title:** MGR      (X) Change ( ) Addition  
**Name:** GERMANI, STEPHEN S  
**Address:** 725 BRANCH AVE. SUITE 209  
**City-St-Zip:** PROVIDENCE, RI 02904

**Title:** MGR      (X) Change ( ) Addition  
**Name:** GERMANI, KERRI A  
**Address:** 725 BRANCH AVE. SUITE 209  
**City-St-Zip:** PROVIDENCE, RI 02904

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:** KERRI A. GERMANI

MM

10/16/2007

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