

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M07000000271

FILED
Nov 03, 2008
Secretary of State

Entity Name: VISTA SETTLEMENT SERVICES, LLC

Current Principal Place of Business:

20 NORTHWEST THIRD STREET
EVANSVILLE, IN 47708

New Principal Place of Business:

Current Mailing Address:

20 NORTHWEST THIRD STREET
EVANSVILLE, IN 47708

New Mailing Address:

FEI Number: 14-1983457

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: MATTHEW SWENIDMAN

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WILKINSON, WINSTON
Address: 38 FOUNTAIN SQUARE PLAZA
City-St-Zip: CINCINNATI, OH 45263

Title: MGR () Delete
Name: KABAT, KEVIN
Address: 38 FOUNTAIN SQUARE PLAZA
City-St-Zip: CINCINNATI, OH 45263

Title: MGR () Delete
Name: CARMICHAEL, GREG
Address: 38 FOUNTAIN SQUARE PLAZA
City-St-Zip: CINCINNATI, OH 45263

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

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

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: KABAT, KEVIN T
Address: 38 FOUNTAIN SQUARE PLAZA
City-St-Zip: CINCINNATI, OH 45263

Title: MGR (X) Change () Addition
Name: CARMICHAEL, GREG D
Address: 38 FOUNTAIN SQUARE PLAZA
City-St-Zip: CINCINNATI, OH 45263

Title: MGR (X) Change () Addition
Name: REYNOLDS, PAUL L
Address: 38 FOUNTAIN SQUARE PLAZA
City-St-Zip: CINCINNATI, OH 45263

Title: SEC () Change (X) Addition
Name: PAUL, THERESE M
Address: 38 FOUNTAIN SQUARE PLAZA
City-St-Zip: CINCINNATI, OH 45263

Title: AS () Change (X) Addition
Name: SWENDIMAN, MATTHEW
Address: 38 FOUNTAIN SQUARE PLAZA
City-St-Zip: CINCINNATI, OH 45263

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: MATTHEW SWENDIMAN

AS

11/03/2008

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