

# 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M98000000061

FILED  
Sep 28, 2005  
Secretary of State

**Entity Name:** BANC OF AMERICA SECURITIES LLC

**Current Principal Place of Business:**

100 N TRYON ST  
NC1-007-20-01  
CHARLOTTE, NC 28255

**New Principal Place of Business:**

**Current Mailing Address:**

100 N TRYON ST  
NC1-007-20-01  
CHARLOTTE, NC 28255

**New Mailing Address:**

401 N TRYON ST  
NC1-021-02-20  
CHARLOTTE, NC 28255

FEI Number: 56-2058405      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:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: CT CORPORATION SYSTEM

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: NATIONS BANC MONTGOME, RY HOLDINGS CO R PORATIO  
Address: 401 N TRYON STREET NC1-021-02-20  
City-St-Zip: CHARLOTTE, NC 28255

Title: MGR ( ) Delete  
Name: MROZ, GREG S  
Address: 401 N TRYON ST; NC1-021-02-20  
City-St-Zip: CHARLOTTE, NC 28255

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: DE MOLINA, ALVARO G  
Address: 401 N TRYON ST; NC1-021-02-20  
City-St-Zip: CHARLOTTE, NC 28255

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ALVARO G DE MOLINA

MGR

09/28/2005

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