

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

<b>DOCUMENT # P04000100328</b> 1. Entity Name LIBERTY MORTGAGE FUNDING, INC.	
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FILED  
06 MAY 23 PM 4: 18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business 359 EAST MALLORY CIRCLE DELRAY BEACH, FL 33483	Mailing Address 359 EAST MALLORY CIRCLE DELRAY BEACH, FL 33483
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2. Principal Place of Business 5570 COACH HOUSE CIR Suite, Apt. #, etc.	3. Mailing Address 5570 COACH HOUSE CIR Suite, Apt. #, etc.
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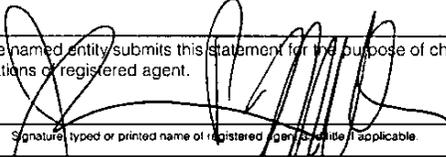
City & State BOCA RATON FL Zip 33486	Country US	City & State BOCA RATON FL Zip 33486	Country US
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05142006 REIN-P	CR2E098 (11/05)	05-06
4. FEI Number 80-1501600	Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		

6. Name and Address of Current Registered Agent  WEINSTEIN, JEFFREY C 3351 NW BOCA RATON BOULEVARD BOCA RATON, FL 33431	7. Name and Address of New Registered Agent Name MILLER JOHN P Street Address (P.O. Box Number is Not Acceptable) 2499 GLADES RD SUITE 305A City BOCA RATON FL Zip Code
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8. 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. I am familiar with, and accept the obligations of registered agent.

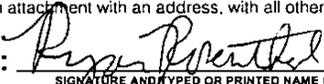
SIGNATURE  <small>Signature typed or printed name of registered agent, if applicable</small>	JOHN P. MILLER <small>(NOTE: Registered Agent signature required when reinstating)</small>	5-14-06 DATE
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<b>FILE NOW!!! FEE IS \$300.00</b>	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROSENTHAL, RYAN 359 EAST MALLORY CIRCLE BOCA RATON, FL 33483 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROSENTHAL, RYAN 5570 COACH HOUSE CIR BOCA RATON FL 33486 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  RYAN ROSENTHAL	5-14-06 Date	Daytime Phone #
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