2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000091149

Entity Name: SOUTHEAST LENDING MORTGAGE CORP.

FILED Feb 29, 2008 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

13615 S. DIXIE HWY., STE. 470 15420 SW 156 AV PINECREST, FL 33176 MIAMI, FL 33187

Current Mailing Address: New Mailing Address:

13615 S. DIXIE HWY., STE. 470 15420 SW 156 AV PINECREST, FL 33176 MIAMI, FL 33187

FEI Number: 20-5195390 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WHITE, NEWTON E. LOARCA, AIVET 17690 S. DIXIE HWY., STE. B-309 15420 SW 156 AV PALMETTO BAY, FL 33157 US MIAMI, FL 33187 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: AIVET LOARCA 02/29/2008

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete Title: P (X) Change () Addition

 Name:
 SALAZAR, MARCOS
 Name:
 LOARCA, AIVET

 Address:
 13615 S. DIXIE HWY., STE. 470
 Address:
 15420 SW 156 AV

 City-St-Zip:
 PINECREST, FL 33176
 City-St-Zip:
 MIAMI, FL 33187

Title: D (X) Delete Title: () Change () Addition

 Name:
 DA MERON, FIELDING
 Name:

 Address:
 13615 S. DIXIE HWY., STE. 470
 Address:

 City-St-Zip:
 PINECREST, FL 33176
 City-St-Zip:

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AIVET LOARCA P 02/29/2008