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		<u>UU</u>		0	

C T CORPORATION SYSTEM	000	
Requestor's Name 660 East Jefferson Street	et	
Address Tallahassee, Florida 3: City State Zip		9000025702995 -06/24/9801002011 ******70.00 ******70.00
Acres	Wild FARMS, INC	
Profit () NonProfit () Limited Liability Composition () Limited Partnership () Reinstatement () Certified Copy () Call When Ready Walk In () Mail Out	() Amendment () Dissolution/With () Annual Report () Reservation () Photo Copies () Call if Problem () Will Wait	() Merger drawal () Mark () UC FILING () Other () Change of R.A. () Fictitious Name () CUS/ G/S 22 () After 4:30 Pick Up
Name Availability Document Examiner Updater Verifier Acknowledgment W.P. Verifier	6/23	PLEASE RETURN EXTRA COPY(S) FILE STAMPED 23 Please call Jeff Butterfield if any problems/questions. P. 3: THANKS PROBLEM 3:

CR2E031 (1-89)

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	Acres Wild Farm, Inc.
1.	(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION", or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2.	Delaware 3. Applied For (State or country under the law of which it is incorporated) (FEI number, if applicable)
4.	August 18, 1994 5. PERPETUAL (Date of incorporation) 5. PERPETUAL (Duration: Year corp. will cease to exist or "perpetual")
6.	New Opon Qualification (Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.)
7.	Plainville, MA 02762
8.	(Current mailing address) Equestrian instruction and related activities and any other lawful act or activity. (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9.	Name and street address of Florida registered agent: Name: CT CORPORATION SYSTEM
	Office Address: clo C T Corporation System, 1200 South Pine Island Road
	Plantation Florida, 33324 (Zip Code)
d	O. Registered agent acceptance: laving been named as registered agent and to accept service of process for the above stated corporation at the place lesignated in this application. I heraby accept the appointment as registered agent and agree to act in this capacity. I buther agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.
	Registered agent's signature) (Officer)
	(Type Name and Title of Officer)
FL	, - 2189 - 1/6/98) Patricia A. Cauario

- 11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.
- 12. Names and addresses of officers and/or directors:

A.	•	eet address only - P.O. Box NOT acceptable)	
	Chairman:	Jilluann Martin	_
	Address:	108 Hawkins Street, P.O. Box 1688	_
		Plainville, MA 02762	 -
	Vice Chain	nan:	<u>.</u>
			.
	_		_
	Address: _		
	Director:		98 J
	Address: _		JUN 23 PR
В.	OFFICERS (Street	et address only - P.O. Box NOT acceptable)	FILED 98 JUN 23 PM 3: 52 TALLAHASSEE FLORIGE SECRETARISEE FLORIGE SECRETARISE SECRET
	President:	Jilluann Martin	
	Address: _	108 Hawkins Street, P.O. Box 1688 Plainville, MA 02762	
	Vice Presid	lent None	
	Address: _		
	Secretary:	Jilluann Martin	
	Address: _	108 Hawkins Street, P.O. Box 1688	-

Plainville, MA 02762

617 482 9807 P.04/04

Treasurer:	Jilluann Martin	
Address: _	108 Hawkins Street, P.O. Box 1688	
	Plainville, MA 02762	
and/or directors.	u may attach an addendum to the application listing additions One of the application listing additions an, Vice Chairman, or any officer listed in number 12 of the	l officers
(Signature of Chairma application)	an, Vice Chairman, or any officer listed in number 12 of the	•
14 Jilluann Marti		·
ومم اممامه	no and capacity of person signing application)	

98 JUN 23 PM 3: 52
SECRETARY OF STATEA

State of Delaware

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ACRES WILD FARM, INC." IS DULY

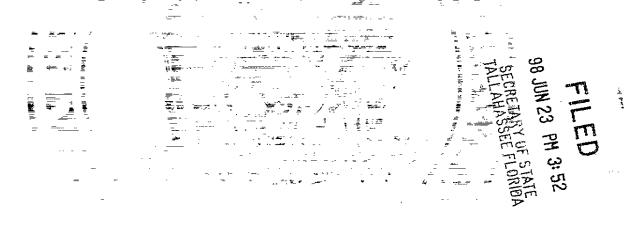
INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE

RECORDS OF THIS OFFICE SHOW, AS OF THE TENTH DAY OF JUNE, A.D.

1998.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



Edward J. Freel, Secretary of State

AUTHENTICATION:

9129464

DATE:

06-10-98

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