

**2013 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P96000087695

**FILED  
Oct 12, 2013  
Secretary of State**

**Entity Name:** IDLEWILD STABLES, INC.

**Current Principal Place of Business:**

13501 SOUTH SHORE BLVD  
SUITE 102  
WELLINGTON, FL 33414

**New Principal Place of Business:**

**Current Mailing Address:**

13501 SOUTH SHORE BLVD  
SUITE 102  
WELLINGTON, FL 33414

**New Mailing Address:**

**FEI Number:** 65-0717861      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

GRIMES, JOHN  
13501 SOUTH SHORE BLVD  
SUITE 102  
WELLINGTON, FL 33414 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: JOHN GRIMES

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: GRIMES, JOHN  
Address: 13501 SOUTH SHORE BLVD SUITE 102  
City-St-Zip: WELLINGTON, FL 33414

I hereby 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 all other like empowered.

SIGNATURE: JOHN GRIMES

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

OWNE

10/12/2013

\_\_\_\_\_  
Date