PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 NOV -4 PM 4:02

DOCUMENT # 804653

1. Corporation Name

SOUTHERN STATES LAND AND TIMBER CORPORATION

Principal Place of Business	Mailing Address
228 ST CHARLES AVENUE SUITE 716 NEW ORLEANS LA 70130-2607	228 ST CHARLES AVENUE SUITE 716 NEW ORLEANS LA 70130-2607

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

300001998683--2
-11/07/96--01021--027
****383.75 ****383.75

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. Date Incorporated or Qualified To Do Business in Florida: 12/11/1936

5. FEI Number: 59-0458270 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
VP PD	LEMANN, THOMAS B	201 ST.CHARLES AVE,#3300	NEW ORLEANS LO LA 70130
~~PD~~ D	~~LEMANN, STEPHEN B~~ SHIRLEY J. HINZ	~~201 ST.CHARLES AVE,#3300~~ 652 Cypress Key Circle	~~NEW ORLEANS LO~~ Atlantis, FL 33462
VD	BRIGHT, EDGAR A G JR	300 ONE SHELL SQUARE	NEW ORLEANS LO LA 70175
D	RICHARD K. LEEFE	3900 CAUSEWAY BLVD. SUITE 1470	METAIRIE LO LA
STD	~~ROBRIGUE, ROBERT P~~ Kimberley M. Quintana	~~228 ST CHARLES AVE #716~~ 228 ST. CHARLES AVE. SUITE 716	NEW ORLEANS, LA 00000
D	CAMBRE, RONALD C.	1615 POYDRAS STREET	NEW ORLEANS LA

8. Name and Address of Current Registered Agent

BOTOS, MICHAEL E
1900 PHILLIPS POINT WEST
777 SOUTH FLAGLER DRIVE
W. PALM BCH. FL 33401-6198

9. Name and Address of New Registered Agent

Name: Steven A. Mayans
Street Address (P.O. Box Number is Not Acceptable): 515 N. Flagler Drive
Suite, Apt. #, Etc.: Suite 900
City: West Palm Beach | State: FL | Zip Code: 33402

CR2E040 (7/96)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: SIGNATURE REQUIRED — Date: 9/23/96
REGISTERED AGENT MUST SIGN

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒ (See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Kimberley M. Quintana SIGNATURE REQUIRED — 9/20/96 — (504)523-4901
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Kimberley M. Quintana, Secretary; Treasurer