PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

09 NOV -3 PM 1:20

DOCUMENT # F95000002363

1. Corporation Name
EMERY FARM ESTATES LTD. CO.

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
5, HILLIARDS COURT,	5, HILLIARDS COURT,
Suite, Apt. #, etc. CHESTER BUSINESS PARK	Suite, Apt. #, etc. CHESTER BUSINESS PARK,
City & State CHESTER, CHESHIRE	City & State CHESTER CHESHIRE
Zip / Country CH4 9QP / UK.	Zip / Country CH4 9QP / UK.

CR2E081 (12/08)

500182453475
11/03/09 01029 015 **43.00

4. Date Incorporated or Qualified To Do Business in Florida: 1995 (5/15)

5. FEI Number: 98-0058423 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☑ $8.75 Additional Fee required for one Certificate of Status

7. Name and Address of Current Registered Agent

Name: DETTMAN PROPERTIES INC.
Street Address (P.O. Box Number is Not Acceptable): 2550, N. FEDERAL HWY
Suite, Apt. #, Etc.: SUITE 6
City: FORT LAUDERDALE | State: FL | Zip Code: 33305

☑ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: [signature] PRESIDENT — Date: 10/27/09
REGISTERED AGENT MUST SIGN

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
VD	EMERY, LOUISE G.	5 HILLIARDS COURT, CHESTER BUSINESS PARK	CHESTER CHESHIRE CH4 9QP UK
PD	EMERY, JOSEPHINE A	5, HILLIARDS COURT, CHESTER BUSINESS PARK	CHESTER CHESHIRE CH4 9QP UK
VD	WADSWORTH, DAVID I.	5, HILLIARDS COURT, CHESTER BUSINESS PARK	CHESTER CHESHIRE CH4 9QP UK
	REINSTATEMENT 07-09 B		
			11/4/09

10. 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 contained in Chapter 119, 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.

01144-7768

SIGNATURE: Josephine A. Emery — JOSEPHINE A. EMERY — 10/23/09 — 793873
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #