PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 APR 28 AM 8:32
SECRETARY OF STATE
TALLAHASSEE FLORIDA

MJH

DOCUMENT # L00000001969

1. Limited Liability Company's Name
C&M Ranch Enterprises, LLC

4/28 2002-2003

2. Principal Office Address	**3.** Mailing Office Address
6741 SW Albritton St.	6741 SW Albritton St.
Suite, Apt. #, etc. -	Suite, Apt. #, etc. -
City & State: Arcadia, FL	City & State: Arcadia, FL
Zip: 34266 Country: USA	Zip: 34266 Country: USA

4. State/Country of Formation: Florida, USA

5. Date Organized or Qualified To Do Business in Florida: February 15, 2000

6. FEI Number: 55-1159479 ☐ Applied For ☐ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☑ $5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name: Marlene A. Isenhart

Street Address (P.O. Box Number is Not Acceptable): 6741 SW Albritton St.

Suite, Apt. #, Etc.:

City: Arcadia State: FL Zip Code: 34266

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of Registered Agent: Marlene A. Isenhart
REGISTERED AGENT MUST SIGN

Date: April 23, 2003

CR2E041 (10/02)

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/ Managers	Street Address of Each Managing Member/ Manager	City / State / Zip
MGRM	Marlene A. Isenhart	6741 SW Albritton St.	Arcadia, FL 34266
MGRM	Charles P. Tesh	6741 SW Albritton St.	Arcadia, FL 34266
MGRM	Robert M. Tesh	104 Little Ridge Rd.	Berkley Lake, GA 30136

800017211438
04/28/03--01111--002 **155.00
05/12/03--01033--009 **55.00

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. 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 of Managing Member/Manager: Marlene A Isenhart Date: 4/23/2003 Daytime Phone #: (863)494-0113

Typed or printed name of signing Managing Member/Manager: Marlene A. Isenhart