2005 LIMITED LIABILITY COMPANY REINSTATEMENT

REINSTATEMENT				rileu		
DOCUMENT # L03000023 1. Entity Name AMERICAN CATTLE TRUST, LLC	3165				ARY OF STATE F CORPORATIO -1 AM 9: 27	
Principal Place of Business 2445 NW 14TH PLACE GAINESVILLE, FL 32605	Mailing Address 2445 NW 14TH PLACE GAINESVILLE, FL 326		ak			
2. Principal Place of Business	3. Mailing Address					
Suite, Apt. #, etc.	Suite, Apt. #, etc.		02242005	REIN-LLC	CR2E101 (6/04	1)
City & State	City & State		4. FEI Numb	er	 	Applied For
Zip Country Alachua	Zip	Alacha		of Status Desired	\$5.00 A Fee Requ	dditional
6. Name and Address of Current	t Registered Agent	Name	7. Name and	Address of New F	Registered Agent	
WATSON, WILLIAM B III 527 EAST UNIVERSITY AVENUE GAINESVILLE, FL 32601		Street Addre	Street Address (P.O. Box Number is Not Acceptable)			
· ~	\sim	City			FL Zip C	ode
8. The above named entity submits this statement for		registered office or reg	gistered agent, or bo	th, in the State of Flo	orida. I am familiar wi	h, and accept
the obligations of registered agent. SIGNATURE	UNAX -	E: Registered Agent signature	required when reinstating	, <i>SJI</i> 7	DATE	
SIGNATURE / Julian	UNAX -		required when reinstating	Mak	DATE Re check payable to a Department of St	
SIGNATURE Signature, tops or printed name of registered agent FILE NOWI!! FEE IS \$200.00 9. MANAGING MEMB	t and title 1 applicable. (NOT	TE: Registered Agent signature	required when reinstating	Mak	ce check payable to a Department of St /CHANGES	ate
FILE NOWILL FEE IS \$200.00 9. MANAGING MEMB TITLE MGRM FIELDS, MICHAEL J STREET ADDRESS 2445 NW 14TH PLACE	t and title 1 applicable. (NOT	TE: Registered Agent signature		Mak Florid	ke check payable to a Department of St	ate
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