2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000112314

Name:

Address:

City-St-Zip:

NOBLES, LEWIS G

P O DRAWER 2310

LABELLE, FL 33975

Entity Name: HERE TIS CATTLE COMPANY LLC

FILED Jun 24, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 891 DEVILS GARDEN DRIVE 891 W COWBOY WAY LABELLE, FL 33935 SUITE 1 LABELLE, FL 33935 **Current Mailing Address: New Mailing Address:** P O DRAWER 2310 LABELLE, FL 33975 FEI Number: 26-3835280 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NOBLES, LEWIS J III NOBLES, LEWIS J III 891 DEVÍLS GARDEN DRIVE 891 W COWBOY WAY LABELLE, FL 33935 SUITE 1 LABELLE, FL 33935 US 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: LEWIS J NOBLES III 06/24/2009 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete NOBLES, LEWIS J III Name: Name: Address: P O DRAWER 2310 Address: City-St-Zip: LABELLE, FL 33975 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: NOBLES, KARA L Name: Address: P O DRAWER 2310 Address: City-St-Zip: LABELLE, FL 33975 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition MILLER, ELIZABETH A Name: Name: P O DRAWER 2310 Address: Address: City-St-Zip: LABELLE, FL 33975 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Name:

Address:

City-St-Zip:

SIGNATURE: LEWIS J NOBLES III MGRM 06/24/2009