

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000054971

Entity Name: B.A.T. FARM LLC.

**FILED**  
**Jan 18, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

5018 FEARNLEY RD.  
LAKE WORTH, FL 33467

**New Principal Place of Business:**

**Current Mailing Address:**

5018 FEARNLEY RD.  
LAKE WORTH, FL 33467

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WILSON, LYNDA  
5200 FEARNLEY RD.  
LAKE WORTH, FL 33467 US

**Name and Address of New Registered Agent:**

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: LYNDA WILSON

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: P  
Name: WILSON, RICHARD  
Address: 5200 FEARNLEY RD.  
City-St-Zip: LAKE WORTH, FL 33467

Title: MGR  
Name: WILSON, LYNDA  
Address: 5200 FEARNLEY RD.  
City-St-Zip: LAKE WORTH, FL 33467

Title: S  
Name: WILSON, LYNDA  
Address: 5200 FEARNLEY RD.  
City-St-Zip: LAKE WORTH, FL 33467

I hereby 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.

SIGNATURE: LYNDA WILSON

MM

01/18/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date