

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M07000005151

Entity Name: R & E FARMS, LLC

FILED
Dec 03, 2009
Secretary of State

Current Principal Place of Business:

30043 EDWARDS ROAD
FLORALA, AL 36442

New Principal Place of Business:

625 BURNT ST.
BLACK, AL 36314

Current Mailing Address:

30043 EDWARDS ROAD
FLORALA, AL 36442

New Mailing Address:

FEI Number: 20-4981322 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:

EDWARDS, SHON
1071 BELL ROAD
DEFUNIAK SPRINGS, FL 32433 US

Name and Address of New Registered Agent:

RIVENBARK, WILLIAM
1071 BELL ROAD
DEFUNIAK SPRINGS, FL 32433 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: WILLIAM RIVENBARK

12/03/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: PRES () Delete
Name: EDWARDS, CHARLES S
Address: 30043 EDWARDS RD
City-St-Zip: FLORALA, AL 36442 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MR. (X) Change () Addition
Name: RIVENBARK, WILLIAM
Address: 625 BURNT ST.
City-St-Zip: BLACK, AL 36314 US

Title: MR. () Change (X) Addition
Name: EDWARDS., SHON
Address: 30043 EDWARDS RD
City-St-Zip: FLORALA, AL 36442 US

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.

SIGNATURE: WILLIAM RIVENBARK

MR.

12/03/2009

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