2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000102454

Entity Name: M & M FARMS EAST COAST, INC.

FILED Apr 17, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4013 SHOAL LINE BLVD. 6252 COMMERCIAL WAY HERNANDO BEACH, FL 34607 US

PMB 205

WEEKI WACHEE, FL 34613 US

Current Mailing Address: New Mailing Address:

6252 COMMERCIAL WAY 4013 SHOAL LINE BLVD.

PMB 205 HERNANDO BEACH, FL 34607 US

WEEKI WACHEE, FL 34613 US

FEI Number: 26-1087503 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MARCI, JAMES MONTES, LISA 2288 COMMERCIAL WAY 6252 COMMERCIAL WAY

SPRING HILL, FL 34606 US PMB 214 WEEKI WACHEE, FL 34613 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: LISA MONTES 04/17/2009

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD () Delete Title: (X) Change () Addition

MONTES, GILDA E MONTES, GILDA E Name: Name: 4013 SHOAL LINE BLVD 3496 GULFCOAST DR. Address: Address:

City-St-Zip: HERNANDO BEACH, FL 34607 US City-St-Zip: HERNANDO BEACH, FL 34607 US

Title: VΡ () Delete Title: VΡ (X) Change () Addition

Name: ELIAS, DESDEMONA Name: ELIAS, DESDEMONA 4013 SHOAL LINE BLVD 3796 FAIRHILL DR. Address: Address:

HERNANDO BEACH, FL 34607 US HERNANDO BEACH, FL 34607 US City-St-Zip: City-St-Zip:

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Ρ SIGNATURE: GILDA MONTES 04/17/2009