

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P09000102581

**Entity Name:** LARKIN CATTLE COMPANY, INC.

**FILED**  
**Nov 04, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

39651 LARKIN LAKE DRIVE  
DADE CITY, FL 33525

**New Principal Place of Business:**

**Current Mailing Address:**

39651 LARKIN LAKE DRIVE  
DADE CITY, FL 33525

**New Mailing Address:**

P.O. BOX 1747  
DADE CITY, FL 33526

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

FOWLER WHITE BOGGS P.A.  
501 E. KENNEDY BLVD  
SUITE 1700  
TAMPA, FL 33602 US

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

LARKIN, JON S LL  
39651 LARKIN LAKE DR.  
DADE CITY, FL 33526 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: JON S. LARKIN LL

11/04/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: LARKIN, JON S II  
Address: 39651 LARKIN LAKE DRIVE  
City-St-Zip: DADE CITY, FL 33525

I hereby 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 all other like empowered.

SIGNATURE: JON S. LARKIN II

PRES

11/04/2010

Electronic Signature of Signing Officer or Director

Date