2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000011215

Entity Name: SHER-AL FARMS, INC.

FILED Jan 13, 2009 Secretary of State

Current Principal Place of Business:

C/O ROTH & SCHOLL C/O ROSANNE M. DUANE, P.A. 1500 SAN REMO AVE., STE. 176 50 SO. U.S. HWY 1, SUITE 213

JUPITER, FL 33477

New Mailing Address:

CORAL GABLES, FL 33146 **Current Mailing Address:**

C/O ROTH & SCHOLL C/O ROSANNE M. DUANE, P.A. 1500 SAN REMO AVE., STE. 176 50 SO. U.S. HWY 1, SUITE 213 CORAL GABLES, FL 33146 JUPITER, FL 33477

FEI Number: 65-0924066 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ROTH, JEFFREY C ROTH & SCHOLL 1500 SAN REMO AVE., STE. 176 CORAL GABLES, FL 33146 US

DUANE, ROSANNE M ROSANNE M. DUANE, P.A. 50 SO. U.S. HWY 1, SÚITE 213 JUPITER, FL 33477 US

New Principal Place of Business:

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: ROSANNE M. DUANE

Electronic Signature of Registered Agent Date

Title:

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

01/13/2009

Title: () Delete

CHESLER, ALAN CHESLER, ALAN Name: Name: C/O 1500 SAN REMO AVE., STE. 176 C/O 50 SO. U.S. HWY 1 SUITE 213 Address: Address:

City-St-Zip: CORAL GABLES, FL 33146 City-St-Zip: JUPITER, FL 33477

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

Name: CHESLER, SHERRY Name: CHESLER, SHERRY

C/O 1500 SAN REMO AVE., STE. 176 C/O 50 SO. U.S. HWY 1 SUITE 213 Address: Address:

CORAL GABLES, FL 33146 JUPITER, FL 33477 City-St-Zip: City-St-Zip:

Title: (X) Change () Addition Title: () Delete CHESLER, FRANKIE CHESLER, FRANKIE Name: Name:

C/O 1500 SAN REMO AVE., STE. 176 Address: C/O 50 SO. U.S. HWY 1 SUITE 213 Address:

City-St-Zip: CORAL GABLES, FL 33146 City-St-Zip: JUPITER, FL 33477

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.

SIGNATURE: ALAN CHESLER D 01/13/2009