2001 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 24, 2001 8:00 am Secretary of State DOCUMENT # F9900001591 STERLING ARCHITECTURE, INC. 01-24-2001 90057 014 ***150.00 Principal Place of Business Mailing Address 1017 HAMPSHIRE DR. 1017, HAMPSHIRE DR. MARYVILLE TN 37801 MARYVILLE TN 37801 606937 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 62-1058924 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATE ACCESS, INC. Street Address (P.O. Box Number is Not Acceptable) 236 EAST 6TH AVE. TALLAHASSEE FL 32303 City Zip Code FI 8. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. CP TITLE □ Delete ☐ Addition TITLE Change NAME STERLING, CHARLES H NAME STREET ADDRESS 1017 HAMPSHIRE DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MARYVILLE TN 37801 TITLE ☐ Delete Addition ☐ Change WOLLACK, JOHN NAME NAME STREET ADDRESS 1017 HAMPSHIRE DR. STREET ADDRESS CITY-ST-ZIP MARYVILLE TN 37801 CITY-ST-ZIP TITLE Delete TITLE Addition ☐ Change NAME REESE, MELANIE NAME STREET ADDRESS STREET ADDRESS 1017 HAMPSHIRE DR. CITY-ST-ZIP CITY-ST-ZIP MARYVILLE TN 37801 TITLE ☐ Defete TITLE Change ☐ Addition NAME ROSSER, CHRIS NAME STREET ADDRESS 1017 HAMPSHIRE DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MARYVILLE TN 37801 ☐ Delete TITLE ST TITLE Change Addition NAME STERLING, KELLY NAME STREET ADDRESS STREET ADDRESS 1017 HAMPSHIRE DR. CITY-ST-ZIP CITY-ST-7IP MARYVILLE TN 37801 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119:07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.