FILED Jul 15, 2002 8:00 am 2002 UNIFORM BUSINESS REPORT (UBR) Secrétary of State **DOCUMENT#** P01000055124 1. Entity Name 05-13-2002 90249 018 ***150.00 TODD PARDUE, INC. Principal Place of Business Mailing Address LIGHT AT AGAINGT OFFI 97234 10 WEST STREET STAMONTE SPRINGS EL 2. Principal Place of Business DRIVE 3. Mailing Address 3208 C EAST C 3208 C EAST COLONGAL DETVE #237 DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number ORLANDO Applied For PRLANDO 59-3*72/144* Not Applicable Country Country 5. Certificate of Status Desired \$8.75 Additional 6. Name and Address of Current Registered Agent Fee Required 7. Name and Address of New Registered Agent Name WIEGEL & WITCHE PR PARDUE Todd O. Box Number is Not Acceptable) DLONZAL CODAL CARLED EL CO City 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. RLANDO SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intengible FILE NOW!!! FEE IS \$150.00 Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Election Campaign Financing \$5.00 May Be (See criteria on back) Make Check Payable to Department of State Trust Fund Contribution. Added to Fees 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE **PSTD** Delete TITLE NAME PARDUE, TODD ☐ Addition NAME STREET ADDRESS WEST SHANGE STREET 3208 C EAST COLONIAL DRIVE STREET ADDRESS TAMONITE CORNINGE EL 2071 CITY-ST-ZIP CITY-ST-ZIP DRLANDO FL 32803 TITLE ☐ Delete TITLE NAME ☐ Change NAME STREET ANOTHS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE NAME ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete NAME ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE HAME ☐ Change ■ Addition 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Attachment 97234

July 10, 2002

Florida Department Of State

Subject: TODD PARDUE, INC

Reference Number: P01000055124

I have just received your letter dated May21, 2002 requesting the correction. I-received this notice on July9, 2002, the letter states I have 30 days to return The corrected form. As you can see that was not possible Due to not receiving it until July 9,2002. please accept this Corrected form and waive the late fee. Thank you for your help on this matter. Any questions please call (407) 896-9514.

Sincerely,

Todd Pardue