200 / UNIFORM BUSINESS REPORT (UBR) \mathbf{FILED} Apr 24, 2001 8:00 am Secretary of State DOCUMENT # P9900096852 1. Entity Name DJ'S TRUCKING + HAULING SERVICE INC 04-24-2001 90034 041 ***150.00 Principal Place of Business Mailing Address PO BOX 42 16901 COUNTY ROAD 48 A005531U MOUNT DORA FL 32757 ZELLWOOD FL 32788-0042 2. Principal Place of Business 3. Mailing Address Suite Ant # etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 31-1688040 Not Applicable Zip Country 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 UWANA K PELTON DUWANA K. MULLINS Street Address (P.O. Box Number is Not Acceptable) 16901 COUNTY ROAD 48 MOUNT DORA FL 32751 Zip Code 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. DUWANA K PELTON X FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 200 / 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. CR2E034 (9/99) TITLE ☐ Delete TITLE Change Addition DUWANA K PELTON DUWANA K. MULLINS 16901 COUNTY ROBD 48 NAME NAME STREET ADDRESS STREET ADDRESS MOUNT DORA FL 32757 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition DAVID I PELTON NAME NAME COUNTY RD 48 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MOUNT DORA FL 32757 CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Delete ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ☐ Change TITI F ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS 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

DULLAMA K. PELTON X 4-16-01 (352) 735-2862