Entity Name: SUNSHINE SAFETY COUNCIL, INC.

Current Principal Place of Business:
150 NORTH BEACH STR
DAYTONA BCH, FL 32114

Current Mailing Address:
150 NORTH BEACH STREET
DAYTONA BCH, FL 32114 US

FEI Number: 59-2372470
Certificate of Status Desired: No

Name and Address of Current Registered Agent:
ARTHUR M. MOUNTCASTLE
150 N. BEACH STREET
DAYTONA BEACH, FL 32114 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:
Electronic Signature of Registered Agent

Officer/Director Detail:

<table>
<thead>
<tr>
<th>Title</th>
<th>Name</th>
<th>Address</th>
<th>City-State-Zip</th>
</tr>
</thead>
<tbody>
<tr>
<td>T</td>
<td>DEJESUS, GEORGETTE</td>
<td>1260 N. ATLANTIC AVENUE</td>
<td>DAYTONA BEACH SHORES FL 32118</td>
</tr>
<tr>
<td>D</td>
<td>LOEWEN, MITCH</td>
<td>801 S. YONGE</td>
<td>ORMOND BEACH FL 32174</td>
</tr>
<tr>
<td>VC</td>
<td>FITZPATRICK, TIM</td>
<td>1845 MASON AVENUE</td>
<td>DAYTONA BEACH FL 32117</td>
</tr>
<tr>
<td>S</td>
<td>MOUNTCASTLE, ARTHUR, M.</td>
<td>1341 GOLDFIELD DRIVE</td>
<td>DAYTONA BEACH FL 32114</td>
</tr>
</tbody>
</table>

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ARTHUR M. MOUNTCASTLE
Electronic Signature of Signing Officer/Director Detail