2000 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 29, 2000 8:00 am Secretary of State **DOCUMENT # 842186** 1. Entity Name DIVERSIFIED ENERGY SERVICES, INC. 04-29-2000 90003 018 ***150.00 Principal Place of Business Mailing Address 8601 DUNWOODY PL #446 8601 DUNWOODY PL #446 ATLANTA GA 30350-2550 ATLANTA GA 30350 HS 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FE! Number 58-1334546 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent 'Name' CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD **PLANTATION FL 33324** Zip Code 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) 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, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back). Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. CR2F034 (9/99) Delete Change ☐ Addition TITLE TITLE MOORE, CHARLES L NAME NAME 6465 BRIDGEWOOD VALLEY R STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ATLANTA GA 33480 Addition Change ☐ Delete TITLE TITLE POYTHRESS, F E NAME NAME STREET ADDRESS 305 MADERA COURT STREET ADDRESS CITY-ST-7IE CITY-ST-ZIF ATLANTA GA 19428 ☐ Change ☐ Addition Delete1 TITLE POYTHRESS, NANCY NAME 305 MADERA COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF atlanta ga Change ☐ Addition ☐ Delete TITLE TITLE wu, Jerry S NAME NAME STREET ADDRESS 8601 DUNWOODY PL, 446 STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP ATLANTA GA 30350 ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE

13. I hereby certify that the information supplied with this filling 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.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/21/2000

770-641-7288