2003 FOR PROFIT CORPORATION

Apr 02, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR)** F00000007202 DOCUMENT # 04-02-2003 90121 033 ***150.00 1. Entity Name KUHN FARM MACHINERY INC. Principal Place of Business Mailing Address 5390 EAST SENECA STREET 5390 EAST SENECA STREET P O BOX 840 P O BOX 840 **VERNON NY 13476** VERNON NY 13476 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. T CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 16-1075665 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 CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 City Zip Code this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept The above named entity submits the obligations of registered age SIGNATURE name of regute ed agent and title it applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!!! FEE IS \$1/50.00 After May 1, 2003 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. , Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE D'Delete TITLE Change Addition SIEBERT: MICHEL NAME NAME 4 IMPASSE DES FABRIQUES STREET ADDRESS STREET ADDRESS 67700 SAVERNE, FRANCE CITY-ST-7IP CITY-ST-ZIP TD ☐ Delete HILE Change ☐ Addition MERTZ, MARC NAME NAME 4 IMPASSE DES FABRIQUES, BP60 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP_-67700 SAVERNE, FRANCE حرZIP_ST_ZIP_ ☐ Delete TITLE Change ☐ Addition NAME RIEGER, ROLAND NAME STREET ADDRESS 4 IMPASSE DES FABRIQUES STREET ADDRESS CITY-ST-ZIP 67700 SAVERNE, FRANCE CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition KRIER, THIERRY NAME STREET ADDRESS 5390 EAST SENECA STREET STREET ADDRESS CITY-ST-ZIP NEW YORK NY 13476-0840 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STEINER, ROLAND NAME STREET ADDRESS 4 IMPASSE DES FABRIQUES > STREET ADDRESS CITY-ST-ZIP 67700 SAVERNE, FRANCE CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition

12. 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 ampowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 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

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THIERRY KRIER, EXECUTIVE V. P.

(315)829-2620

FILED