1. Entity Name

SIGNATURE

SIERRA WEST G.P., INC.

Principal Place of Business

Mailing Address

7000 CENTRAL PARKWAY, SUITE 1500 ATLANTA GA 30328

7000 CENTRAL PARKWAY. SUITE 1500

ATLANTA GA 30328

2. Principal Place of Business 3. Mailing Address 1100 Abernathy 1100 Abernathy Rd NE Suite, Apt. #, etc. Suite, Apt. #, etc.

Northaark 500 Northpark

## **FILED** Mar 08, 2001 8:00 am Secretary of State

03-08-2001 90130 023 \*\*\*150.00

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DO NOT WRITE IN THIS SPACE

			Name			-				
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent						
Zip 30328	Country USA	Zip 30328	Country USA		5. Certificate of Status Desired		\$8.75 Additional Fee Required			
Atlanta, G	Georgia 💮 💮	Atlanta,	Atlanta, Georgia				Not Applicable			
City & State	<del></del>	City & State	City & State		4. FEI Number 58-2095226		Applied For			
TOL COPULA	3001 30C 10	O LINOI LIDAL?	<u> </u>	шц						

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324

Street Address (P.O. Box Number is Not Acceptable)

(NOTE: Registered Agent signature required when reinstating)

NE

Zip Code FL

DATE

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, typed or printed name of registered agent and title if applicable. 9. This corporation is eligible to satisfy its Intangible

FILE NOW!!! FEE IS \$150.00 Tax filing requirement and elects to do so.

After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State 10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

	ria on back)	Make Check Payable			Trust Fund Contribution	. Ц	Added	to Fees	
11.	12.	. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			XXChange □Ad 1100 Abernathy Rd., NE, B1dg.500 Atlanta, Georgia Ste. 700					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LEE, ALAN G 7000 CENTRAL PARKWAY, SUITE ATLANTA GA 30328	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1100	Abernathy Rd., ta, Georgia	, NE,	OXChange Bldg. ∶e. 70	00	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition	

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.

PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
LOVE, President

February 26, 2001 (770) 551-0007

Daytime Phone #

CR2E034 (10/00)