2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # F9400000257 FILED 1. Entity Name THE M & T TECHNICAL SERVICES COMPANY OI MAR 16 PM 3: 14 SECREJARY OF STATE Principal Place of Business Mailing Address 9550 REGENCY SQUARE BLVD 1717 ARCH ST. 35TH FLOOR STE 400 PHILADELPHIA PA 19103 JACKSONVILLE FL 32225 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number 23-0829392 City & State City & State Not Applicable Country \$8.75 Additional Country Zip Ζip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number Is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 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. SIGNATURE (NOTE; Registered Agent signature required when reinstating) Signature, typed or pented name of registered agent and title if explicable. 10. Election Campaign Financing Trust Fund Contribution. FILE NOW!!! FEE:IS:\$150:00:19 (Agree) 9. This corporation is eligible to satisfy its Intangible After MAY 1, 2001 Fee will be \$550.00 to 4005 Tax filing requirement and elects to do so. Make Check Payable to Department of State (See criteria on back) LADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN: 11 OFFICERS AND DIRECTORS 112 11. Change For Addition DULCUR TITLE ☐ Delete TITLE Ronald L. Hun 9500 Reserve Suice Eld Jule 400 : ONUR, EROL A NAME NAME 9550 REGENCY SQUARE BLVD STREET ADDRESS STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP CITY-ST-ZIP ☐ Change ← ☐ Addition ☐ Delete TITLE TITLE SEIDERS, JOSEPH R NAME NAME STREET ADDRESS 1717 ARCH ST. 35TH FLOOR STREET ADDRESS CITY-ST-ZIP PHILADELPHIA PA CITY-ST-ZIP (Change ■ Addition ☐ Delete TITLE TITLE NAGLE, ARLINGTON A NAME NAME STREET ADDRESS 1717 ARCH ST. 35TH FLOOR STREET ADDRESS CITY-ST-ZIP PHILADELPHIA PA CITY-ST-ZIP Addition ☐ Change Detete TITLE President Regular Square Blvd. Suik 400 JETT, DONALD W NAME NAME 9550 REGENCY SQUARE BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL CITY-ST-ZIP Addition ☐ Chaпge ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

SIGNATURE: