2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # **F94000004094** May 08, 2000 8:00 am Secretary of State DELL MARKETING CORPORATION 05-08-2000 90060 027 ***150.00 Mailing Address Principal Place of Business 3513 CONCORD PIKE ONE DELL WAY ROUND ROCK TX 78682-7000 3713 WILMINGTON DE 19803 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 74-2485040 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 CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301 Zip Code FL 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 (NOTE: Registered Agent signature required when reinstating) DATE 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. ☐ Change ☐ Addition CE₀ ☐ Delete TITLE TITLE NAME DELL, MICHAEL S NAME STREET ADDRESS STREET ADDRESS ONE DELLWAY CITY-ST-ZIP CITY-ST-ZIP **ROUND ROCK TX 78682 Change** ☐ Addition ☐ Delete TITLE NAME GARNIEWSKI, JOHN P NAME 2751 Conteroille Rd., Suite 3116 STREET ADDRESS STREET ADDRESS 3513 CONCORD PIKE, STE. 3713 CITY-ST-ZIP CITY-ST-ZIP Wilmington, DE 19808 WILMINGTON DE 19803 Change Addition TITLE Delete TITLE NAME NAME WAGNER, LENORA G 2751 Conterville Rd., Sulte 3116 STREET ADDRESS 3513 CONCORD PIKE STE 3713 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Williagton DE 19808 WILMINGTON DE 19803 Addition ☐ Delete TITI F ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED JAME OF SIGNING OFFICER OR DIRECTOR

LENDRA G. WAGNER

4/24/01)

302.225-5050

Daytime Phone #