2000 UNIFORM BUSINESS REPORT (UBR)

FILED Aug 15, 2000 8:00 am Secretary of State DOCUMENT # F9500005990 1. Entity Name CUNINGHAM, HAMILTON, QUITER, P.A. 08-15-2000 90008 048 ***550.00 Principal Place of Business Mailing Address 201 MAIN ST SE 201 MAIN ST SE MINNEAPOLIS MN 55414 **MINNEAPOLIS MN 55414** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite 325 suite 325 City & State City & State 4. FEI Number Applied For 41-1456525 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 Name 'C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) -1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City 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 \$550.00 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. 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 12. 11. TITLE Delete TITLE D James Scheidel **CUNINGHAM, JOHN W** NAME NAME 4056 Del Rey Ave STREET ADDRESS 201 MAIN ST SE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Marina Del Rey, CA 90292 MINNEAPOLIS MN 55414 ☐ Delete Change ☐ Addition TITLE TITLE curingham, John W. 201 Main Street SE HAMILTON, JOHN E NAME NAME STREET ADDRESS STREET ADDRESS 201 MAIN ST SE CITY-ST-ZIP Minneapolis. MN 55414 CITY-ST-7/P **MINNEAPOLIS MN 55414** Change TITLE Delete TITLE ☐ Addition Quiter John E. QUITER, JOHN E NAME NAME Del Rey Avenue STREET ADDRESS 4056 DEL REY AVE STREET ADDRESS Marina Del Rey, CA 90292 CITY-ST-ZIP CITY-ST-7IP MARINA DEL REY CA 90292 ☐ Change ☐ Addition TITLE ☐ Delete TITLE HOSKENS, THOMAS L NAME NAME STREET ADDRESS 201 MAIN ST SE STREET ADDRESS CITY-ST-7IP **MINNEAPOLIS MN 55414** CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE SOLBERG, RICHARD C NAME 4056 DEL REY AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MARIA DEL RAY CA 90292 Delete ☐ Change ☐ Addition TITLE TITLE LOWE, DOUGLAS A NAME NAME 4056 DEL REY AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MARIA DEL RAY CA 90292 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 received or trustee employered 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 attackment with appearance with all other like employered.

SIGNATURE: