2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

TURE AND TYPED OR PRINTED NAME OF SCHING OFFICER OR DIRECTOR

Apr 22, 2000 8:00 am Secretary of State DOCUMENT # F98000000068 1. Entity Name INTERSTATE TOWING & RECOVERY, INC. 04-22-2000 90105 042 ***150.00 Mailing Address Principal Place of Business 7704 BASSWOOD DR. 7704 Basswood dr. CHATTANOOGA TN 37416 CHATTANOOGA TN 37416-2455 77117 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 58-2334930 Not Applicable Zip Country \$8.75 Additional Country Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 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 DATE (NOTE: Registered Agent signature required when reinstating) 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 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 11. OFFICERS AND DIRECTORS 12. Delete TITLE pach, Mike ROZIER, KENNETH NAME not Basswood Drive hattanooga, TN 37416 2954 PHILIPS HWY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32207 TITLE Delete TITLE Maynordi John MAYNORD, JOHN NAME NAME 704 Basswood Drive 6025 LEE HWY/EXECUTIVE PARK/SUITE 301 STREET ADDRESS STREET ADDRESS hattanorga, TN 37416 CHATTANOOGA TN 37421 CITY-ST-ZIP CITY-ST-7IP Addition TITLE - Delete - - -TITLE Eric.Waller Wexler, Eric NAME NAME nnoy Basswood Drive 6025 LEE HWY/EXECUTIVE PARK/SUITE 301 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHATTANOOGA TN 37421 CUTY-ST-ZIP ☐ Change Addition Delete TITLE TITLE BADGLEY, JEFFREY I NAME NAME STREET ADDRESS 8503 HILLTOP DRIVE STREET ADDRESS CITY-ST-ZIP OOLTEWAH TN 37363 CITY-ST-ZIP ☐ Delete Change Addition A TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP Change Addition □ Delete 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

Daytime Phone #