2000 UNIFORM BUSINESS REPORT (UBR)

May 12, 2000 8:00 am Secretary of State DOCUMENT # F9800000166 Entity Name IVIS INTERNATIONAL, INC. 05-12-2000 90049 049 ***150.00 Mailing Address Principal Place of Business 2501 BLUE RIDGE RD 2501 BLUE RIDGE RD STF 500 STE 500 RALEIGH NC 27607 RALEIGH NC 27607-6479 ius 2. Principal Place of Business Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4, FEI Number City & State 88-0213684 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired 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 City 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 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 After MAY 1, 2000 Fee will be \$550.00 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 11. 12 ☐ Addition Change ☐ Delete TITLE HALE, MICHAEL NAME STREET ADDRESS STREET ADDRESS 25 ROSE HILL ROAD CITY-ST-ZIP CITY-ST-ZIP SUFFERN NY 10901 Delete TITLE Change ☐ Addition TITLE NAME BURGON, JEROLD NAME STREET ADDRESS 228 JANSMITH LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP RALEIGH NC 27615 ☐ Change ☐ Addition TITLE ☐ Delete NAME MCALISTER, DAVIS NAME STREET ADDRESS STREET ADDRESS 440 FOX BAY DRIVE CITY-ST-ZIP CITY-ST-ZIP **BRANDON MS 39042** ☐ Change ☐ Addition Delete TITLE TITLE GRIFFIN, EUGENE M NAME NAME STREET ADDRESS STREET ADDRESS 32 DEERFIELD RD CITY-ST-ZIE CITY-ST-ZIP MENDHAM NJ 07945 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change 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 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

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SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR OR DIRECTOR OR DIRECTOR OR DIRECTOR OR DIRECTOR OF SIGNING OFFICER OR DIRECTOR OR DI