FILED

2001 UNIFORM BUSINESS REPORT (UBR)

May 03, 2001 8:00 am Secretary of State DOCUMENT # F9800005483 PROCESS DESIGN, INC. 04-11-2001 90090 008 ***150.00 Principal Place of Business Mailing Address 2350 HIGHWAY 101 SOUTH 2350 HIGHWAY 101 SOUTH STE 200 **STE 200** GREEN SC 39851 GREEN SC 39534 Greet, SC 29651 Greer, SC 29651 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 57-1011656 710815 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 965 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DRUMMOND, WM BRIAN Street Address (P.O. Box Number is Not Acceptable) 10151 DEERWOOD PARK BLVD. BUILDING 200, SUITE 250 JACKSONVILLE FL 32256 Zip Code City 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, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when rematating) DATE 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, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change 📈 Addition Bruce B. Clayman PAGE, DANIEL V NAME NAME STREET ADORESS **5 SANDWICH LANE** STREET ADDRESS 225 Sandy Run Dr. CITY-ST-ZIP CAMPOBELLO SC 29322 CITY-ST-ZIP Change ☐ Addition Oelete TITLE TURKNETT, JAMES NAME NAME STREET ADDRESS 124 RIDGE WAY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP STATESBORO GA 30458 TITLE Change Addition ☐ Detete AVERY, HOWARD K NAME NAME STREET ACCRESS 114 ANTIGUA WAY-STREET ADDRESS CITY-ST-ZIP GREER SC 29650 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - 71P ☐ Dalete ☐ Addition TITLE ☐ Change 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 eath; 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 attother like empowered. Bruce B. Clayman SIGNATURE:

Crisp Fragues Evans LLP 561123736

I Creekview Court Greenville, SC 29615