2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 02, 2001 8:00 am Secretary of State DOCUMENT # F9900003070 1. Engly Name LINCOLN NO. 2340, INC. 05-02-2001 90021 050 ***150.00 VA 92840 Mailing Address Principal Place of Business P.O. BOX 1920 P.O. BOX 1920 DALLAS TX 75221 DALLAS TX 75221 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State FE! Number 75-2852319 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 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** DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Addition CD TITLE Delete TITLE POGUE, MACK NAME NAME STREET ADDRESS 500 N. AKARD, SUITE 3300 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 75201 ☐ Change ☐ Addition ☐ Delete TITLE BYRNE, TIMOTHY NAME 500 N. AKARD, SUITE 3300 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DALLAS TX 75201 CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE JACKS, DAN NAME NAME 500 N. AKARD, SUITE 3300 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DALLAS TX 75201 CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE TITL F DAVIS, NANCY A NAME NAME 500 N. AKARD, SUITE 3300 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 75201 TITLE ☐ Delete TITLE ☐ Change Addition SHALLOT, CHARLES O NAME NAME STREET ADDRESS 3159 ROYAL DRIVE SUITE 200 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ALPHARETTA GA 30022 Change AS ☐ Addition Delete TITLE TITLE EVERETT, LEIGH ANN NAME NAME STREET ADDRESS STREET ADDRESS 500 N AKARD, SUITE 3300 CITY-ST-7IP CITY-ST-ZIP DALLAS TX 75221

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 changed, or on an attachment with an address, with all other like empowered. Leigh Ann Everett

SIGNATURE:

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Asst. Secretary

4-5-01