FILED Aug 04, 2003 8:00 am Secretary of State

2003	FOR	PROFIT	CORPORA	TION
UNIFO	RM E	BUSINES	REPORT	(UBR)

1. Entity Name DFS-GP, 1		# F9900	00003218			08-04-2003 9	0150 027	***550.00)
Principal Place ONE DELL WA ROUND ROCK	AY. SP1		Mailing Address ONE DELL WAY, SPI ROUND ROCK TX 78682				.		1) 13 1 1 3 11 1 31 2
2. Principal Pl			3. Mailing Address			- 			
One Del		, PL-35	One Dell W	Jay, PI	<u>-32</u>	•••			
						CHECK HERE	IF MAKING		
Round		ΓX :	City & State Round Rock	TX	• •	4. FEI Number 74-289636	5	⊢	oplied For ot Applicable
Zip 7869		Country	Zip 78682	Country USP		5. Certificate of Status Desired		\$8.75 Add	ditional
		and Address of Current			<u>'</u>	7. Name and Address of New	Registered		
0.7.0000		WATER A		Nar	ne				
	PORATION S	LAND ROAD		Stre	et Address (P.O. Box Number is Not Acceptab	e)		
	ON FL 3332			.				-	
, 5 (1)	OII 1	•		City		-	FL	Zip Cod	e
	named entity		r the purpose of changing its re	egistered offi	e or register	ed agent, or both, in the State of F			and accept
SIGNATURE _	Signature, typed of	printed name of registered agent	and title if applicable /NOTE:	Registered Arent	iOnature required	when reinstating)	DATE		
			and making phicable. (1401)	Hogistalet Agent		(Anian (Aniana)	- DAILE		
After Sep	tember 10,	FEE IS \$550.00 2003 Fee will be \$750 Florida Department of	II.			9. Election Campaign F Trust Fund Contribute			May Be to Fees
10.		OFFICERS AND	DIRECTORS	11.		ADDITIONS/CHANGES TO OF	FICERS AND	DIRECTOR	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO HUMPREY, ONE DELL ROUND RO		☐ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	ss One	S/CEO in Nater Dell Way,PL-35 nd Pock, TX 1869	3 7_	Change	⊠ Addition
NAME STREET ADDRESS	SD LAW, MADI ONE DELL	ELYN C	☐ Delete	TITLE NAME STREET ADDR		100		Change	☐ Addition
NAME	COOD WATT, MIC ONE DELL ROUND RO		∑ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	ESS	,		Change	Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·		☐ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	:SS			☐ Change	Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	:SS			☐ Change	Addition

SIGNATURE: 1

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GNATURE AND TYPED OR PRINTEDNAME OF SIGNING OFFICER OR DIRECTOR

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