2008 FOR PROFIT CORPORATION

SIGNATURE:

NATURE ARE EXPED OR PRINTED NAME OF SIGNING OFFICER OR DIREC

Apr 17, 2008 8:00 am Secretary of State ANNUAL REPORT DOCUMENT # F99000003663 04-17-2008 90027 048 ***150.00 1. Entity Name ONESOURCE PAINTING, INC. Mailing Address Principal Place of Business 40070127 1600 PARKWOOD CIRCLE 1600 PARKWOOD CIRCLE SUITE 400 SUITE 400 ATLANTA, GA 30339 US ATLANTA, GA 30339 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04032008 Chg-P CR2E034 (12/06) 4. FEI Number Applied For City & State City & State 52-2137493 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 \Box Trust Fund Contribution Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Delete TITLE ☐ Chance ☐ Addition TITLE GAID, PERRY NAME NAME 1600 PARKWOOD CIRCLE #400 STREET ADDRESS STREET ADDRESS M. melles ATLANTA, GA 30339 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE ☐ Addition NAME MCNEESE, JACK L NAME STREET ADDRESS 1600 PARKWOOD CIRCLE # 400 STREET ADDRESS ATLANTA, GA 30339 CITY-ST-ZIP CITY-ST-ZIP Addition TITLE Delete TITLE Change DOBSON, NAOMI NAME NÃME 1600 PARKWOOD CIRCLE # 400 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ATLANTA, GA 30339 CHY-ST-ZIP Delete TITLE ☐ Change Addition TITLE JONES, CHERYL C NAME NAME 1600 PARKWOOD CIRCLE # 400 STREET ADORESS STREET ADDRESS CITY-ST-ZIP ATLANTA, GA 30339 CITY-ST-ZIP ☐ Addition sv Delete TITLE TITLE Change BINDEMAN, MICHAEL S NAME NAME STREET ADDRESS 1600 PARKWOOD CIRCLE # 400 STREET ADDRESS CHY-ST-ZIP ATLANTA, GA 30339 CITY-ST-ZIP TITLE TITLE ☐ Change Addition MOORE, WILLIAM E NAME NAME STREET ADDRESS 1600 PARKWOOD CIR #400 STREET ADORESS CITY-ST-ZIP ATLANTA, GA 30339 CITY-ST-ZIP flied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information in 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 to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if does not not make the same properties. 12. I hereby certify that the information indicated on this report or supplementary fital report of the corporation or the receive changed, or on an attachment.

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FILED

ATTACHMENT

Officers

Directors

James P McClure

CEO

James P McClure

1600 Parkwood Cr., Suite 400

1600 Parkwood Cr., Suite 400

Atlanta, GA 30339

Atlanta, GA 30339

CFO

James Lusk

James Lusk 1600 Parkwood Cr., Suite 400

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Treasurer

David L Farwell

Henrik C Slipsager

1600 Parkwood Cr., Suite 400

1600 Parkwood Cr., Suite 400

Atlanta, GA 30339

Atlanta, GA 30339

Sarah McConnell 1600 Parkwood Cr., Suite 400

Atlanta, GA 30339

Secretary

Michael S. Bindeman

1600 Parkwood Cr., Suite 400

Atlanta, GA 30339

Senior Vice President