2001 UNIFORM BUSINESS REPORT (UBR) Apr 17, 2001 8:00 am Secretary of State **DOCUMENT # J43569** 1. Entity Name ARCTIC SERVICES, INC. 04-17-2001 90030 028 ***150.00 Mailing Address Principal Place of Business 451 HIGHWAY 27 SOUTH P O BOX 7 LAKE HAMILTON FL 33851 LAKE HAMILTON FL 33851 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 59-2745444 Not Applicable Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ROCKER, JAMES T. Street Address (P.O. Box Number is Not Acceptable) 451 US HWY 275 451 US Hwy 27 South LAKE HAMILTON FL 33851 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 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 Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. P/T/D ☐ Addition X) Change STD ☐ Delete TIT! F TITLE Rocker, James T. NAME NAME ROCKER, JAMES T. STREET ADDRESS 451 US Hwy 27 South 1925 US HWY 17-92 NO. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Lake Hamilton, FL 33851 DAVENPORT FL X Addition Change TITLE V/S/D Delete NAME PEARSON, BENJAMIN F III NAME Rocker, Kay W. STREET ADDRESS 451 US Hwy 27 South STREET ADDRESS 451 HIGHWAY 27 SOUTH CITY-ST-ZIP CITY-ST-ZIP LAKE HAMILTON FL 33851 Lake Hamilton, FL 33851 Change ☐ Addition Delete TITLE TITLE NAME HUBBARD, JERRY W NAME STREET ADDRESS STREET ADDRESS 451 HIGHWAY 27 SOUTH CITY-ST-7IP CITY-ST-ZIP LAKE HAMILTON FL 33851 Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Defete TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 the 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 true emprovered 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 attack prefix with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR