FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Apr 22, 2002 8:00 am § Secretary of State DOCUMENT # L01000006404 04-22-2002 90150 023 ****50.00 MAXCAR SERVICES, LLC Mailing Address Principal Place of Business 1313 W. ST. ROAD 434 1313 W. ST. ROAD 434 WINTER SPRINGS FL 32719 WINTER SPRINGS FL 32719 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 🔨 City & State City & State Not Applicable Country \$5.00 Additional Zip Zip Country Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent WHIGHAM, FRANK C 200 W. FIRST STREET SANFORD FL 32771 City ement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named entity submits this st SIGNATA (NOTE: Registered Agent signature required when reinstating) or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State Due By May 1, 2002 10. ADDITIONS/CHANGES MANAGING MEMBERS/MANAGERS Addition Change TITLE ☐ Defete TITLE MGRM NAME NAME LUCAS, KURT STREET ADDRESS STREET ADDRESS 3281 PLANTER DRIVE CITY-ST-ZIP CITY-ST-ZIP DELTONA FL 32738 ☐ Change Addition ☐ Delete TITLE TITLE MGRM NAME NAME FORTNER, MAX STREET ADDRESS STREET ADDRESS 3281 PLANTER DRIVE CITY-ST-ZIP CITY-ST-ZIP **DELTONA FL 32738** Addition ☐ Change TITLE Delete TITI E NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-ST-ZIP ☐ Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-7IP Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE 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), Fiorida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or distance empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

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107 695 1938



Bepartment of State

I certify the attached is a true and correct copy of the Articles of Incorporation of MAXCAR SERVICES, INC., a Florida corporation, filed on March 29, 2002, as shown by the records of this office.

The document number of this corporation is P02000036478.

Given under my hand and the Great Seat of the State of Florida at Tallahassee, the Capitol, this the Fourth day of April, 2002



CR2EO22 (1-99)

Katherine Harris Katherine Harris Secretary of State