FILED

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Mar 21, 2001 8:00 am DOCUMENT # P00000072866 **Secretary of State** 1. Entity Name COMMUNICATIONS SYSTEMS & SERVICES, INC. 03-21-2001 90030 022 ***150.00 Principal Place of Business Mailing Address 777 S FLAGLER DRIVE. 12TH FLOOR 777 S FLAGLER DRIVE, 12TH FLOOR PHILLIPS POINT EAST TOWER PHILLIPS POINT EAST TOWER WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 52-2265724 Not Applicable Zip Country Zip 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 F & L CORP. Street Address (P.O. Box Number is Not Acceptable) THE GREENLEAF BUILDING THIRD FLOOR 200 LAURA STREET JACKSONVILLE FL 32201-0240 Zip Code City 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 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 Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE ☐ Delete TITLE President ☐ Change ☐ Addition NAME NAME Jeffrey Prosser STREET ADDRESS 777 So. Flagler Dr., Ste.#1201E West Palm Beach, Florida 33401 STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Vice-President TITLE TITLE ☐ Delete Thomas Minnich NAME NAME 777 So. Flagler Dr., Ste.#1201E STREET ADDRESS STREET ADDRESS West Palm Beach, Florida 33401 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Secretary TITLE ☐ Delete TITLE Eling Joseph NAME NAME 777 So. Flagler Dr., Ste.#1201E STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP West Palm Beach, Florida 33401 TITLE Detete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 the relike empowered.

ELING JOSEPH