FILED Jul 22, 2002 8:00 am Secretary of State 2002 UNIFORM BUSINESS REPORT (UBR) P01000083759 DOCUMENT # 1. Entity Name 07-22-2002 90164 037 ***150.00 DAWN ZEMO, P.A. Principal Place of Business Mailing Address 18317 JUPITER LANDINGS DRIVE 18317 JUPITER LANDINGS DRIVE JUPITER FL 33458 JUPITER FL 33458 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. EEI Number Applied For EIN 65 1133502 Not Applicable Zip Country 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 Name WOOD, THEODORE P Street Address (P.O. Box Number is Not Acceptable) 18317 JUPITER LANDINGS DRIVE JUPITER FL 33458 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 FILE NOW!!! FEE IS \$550.00 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 September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Change TITLE ☐ Delete TITLE ☐ Addition ZEMO, DAWN NAME NAME 18317 JUPITER LANDINGS DRIVE STREET ADDRESS STREET ADDRESS JUPITER FL 33458 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change TITLE ☐ Delete Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Addition NAME NAME

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 other like empowered.

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

☐ Delete

☐ Change

☐ Addition

Attackment #P01000083759 July 14,02 Open

To whom it may Concern, I am enclosing a check for \$150 00 for my P.A. Corporation bling fus my tax cd # is Ein 65-1133502, D'can not find the original documentation.

That you all had sent mu-I just got out of the nospital a Atoke. My Social Security # U 115,30-86.83 Please accept my 18317 Jopiter Inds Ds Sincerely

Supiter, Ft 33457 Dawn Zemo 56) 747-4626