FILED 2002 UNIFORM BUSINESS REPORT (UBR) Jul 09, 2002 8:00 am Secrétary of State P01000093458 DOCUMENT # 1. Entity Name 07-09-2002 90375 029 ***150.00 A. L. HARRIS GROUP, INC. Principal Place of Business Mailing Address 5036 RIPPLE RUS DRIVE N 5036 RIPPLE RUS DRIVE N B0127722 JACKSONVILLE FL 32257 JACKSONVILLE FL 32257 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 744901 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 Name HARRIS, ANDREW L Street Address (P.O. Box Number is Not Acceptable) 5036 RIPPLE RUS DRIVE N JACKSONVILLE FL 32257 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. PSTD ☐ Channe ☐ Addition TITLE ☐ Delete TITI F HARRIS, ANDREW L NAME NAME 5036 RIPPLE RUS DRIVE N STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32257 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ■ Addition TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change □ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition

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 ergoowered 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 with all other like empowered.

NAME STREET ADDRESS

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

NAME STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP TITLE

CITY-ST-ZIP

☐ Delete

☐ Change

Addition

Attachment # P01000093458 BOIGNOS-



July 3, 2002

Florida Department of State Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

Re: Petition of late fee for Uniform Business Report Filing

To Whom It May Concern:

I am the owner and president of The Outdoor Company, Inc. and I received the 2002 Uniform Business Report in the mail around the beginning of July. It alerted me that my company had evidently missed the deadline to file the report and that I had 60 days to do so and also that there was a late fee attached to the filing fee.

I never received the prior notice that would have made me aware of such a report and filing fee. Being that this is the first year I have ever been in business for myself, I was not aware that such a report needed to be filed and as such I was not aware to even be on the look out for a notice from the Florida Department of State.

I read in the frequently asked questions section that if I never received the prior notice that I could send in a letter explaining that I did not receive it and that the late fee would be waived as long as I paid the original filing fee of \$150.00.

This letter is simply to ask that the late fee be waived. If there are any questions or there is anything else that I need to do or any additional information I need to provide please let me know.

My Document # is: P01000093458

My FEIN is: 59-3744901

Andy Harris 5036 Ripple Rush Dr. N Jacksonville, FL 32257

Sincerely

Andy Harris President