FILED 2001 UNIFORM BUSINESS REPORT (UBR) Jul 20, 2001 8:00 am Secretary of State DOCUMENT # P28878 1. Entity Name 07-20-2001 90005 014 ***550 00 LOCKTON COMPANIES, INC. Principal Place of Business Mailing Address 444 W 47TH ST 444 W 47TH ST A0078788 STE 900 **STE 900** KANSAS CITY MO 64112-1906 KANSAS CITY MO 64112-1906 ШS Principal Place of Business Mailing Address HILL DO NOT WRITE IN THIS SPACE 900 900 Applied For City & State 4. FEI Number 48-0763803 Not Applicable \$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 CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200:S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code FL 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing \$5.00 May Be After September 12, 2001 Fee will be \$750.00 Tax filing requirement and elects to do so. 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. CR2E034 (5/01) ☐ Addition TITLE CD TITLE ☐ Change ☐ Delete NAME LOCKTON, J T NAME STREET ADDRESS STREET ADDRESS 5825 OVERHILL RD CITY-ST-ZIP MISSION HILLS KS 66208 CITY-ST-ZIP ☐ Addition TITLE ☐ Detete TITLE ☐ Change NAME NAME FRICK, WILLIAM STREET ADDRESS STREET ADDRESS 444 W 47TH ST STE 900 CITY-ST-ZIP CITY-ST-ZIP KANSAS CITY MO 64112 ____ ¬ ☐ Delete TITLE Change - - Addition TITLE CEOD? NAME LOCKTON, DAVID M NAME STREET ADDRESS STREET ADDRESS 6615 BELINDER CITY-ST-ZIP CITY-ST-7IP MISSION HILLS KS 66208 Delete TITI F ☐ Change ☐ Addition TITLE NAME LOCKTON, RONALD J NAME STREET ADDRESS STREET ADDRESS 444 W 47TH ST STE 900 CITY-ST-ZIP CITY-ST-ZIP KANSAS CITY MO 64112 TITLE ☐ Detete TITLE ☐ Change □ Addition NAME FROST, MICHAEL C NAME STREET ADDRESS STREET ADDRESS 12019 PAWNEE CITY-ST-ZIP LEAWOOD KS 66209 CITY-ST-ZIP Addition TITLE ☐ Delete TITLE ☐ Change NAME lumelleau, John L NAME: STREET ADDRESS STREET ADDRESS 444 W 47TH ST STE 900 CITY-ST-ZIP CITY-ST-ZIP KANSAS CITY MO 64112

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13. Thereby 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 en powered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if