2000 UNIFORM BUSINESS REPORT (UBR)

Apr 22, 2000 8:00 am Secretary of State **DOCUMENT # P34589** 1. Entity Name SIMMONS OUTDOOR CORPORATION 04-22-2000 90064 013 ***150.00 Mailing Address Principal Place of Business BLOUNT, INC SIMMONS OUTDOOR CORPORATION 201 PLANTATION OAK DR 4520 EXECUTIVE PARK DR **MONTGOMERY AL 36116-1602** THOMASVILLE GA 31792 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEi Number Applied For City & State 65-0272347 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND RD. 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** Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 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, 2000 Fee will be \$550.00 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 OFFICERS AND DIRECTORS 12. 11. Addition ☐ Delete TITLE TITLE BARSETT, GERALD W NAME NAME 15450 S OUTER FORTY RD STE 135 STREET ADDRESS STREET ADDRESS **CHESTERFIELD MO 63017** CITY-ST-ZIP CITY-ST-ZIP Addition Change Delete TITLE TITLE MCINNES, JOSEPH Irving, Richard H. II NAME NAME 4520 Exautive PARK Brive 4520 EXECUTIVE PARK DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Montgomery, AL 36/16 MONTGOMERY AL CITY-ST-ZIP ☐ Addition CD ☐ Delete TITLE ☐ Change TITLE PANETTIERE, JOHN M NAME NAME STREET ADDRESS 4520 EXECUTIVE PARK DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MONTGOMERY AL VD ☐ Change ☐ Addition ☐ Delete TITLE IRVING, RICHARD H III NAME NAME 4520 EXECUTIVE PARK DR STREET ADDRESS STREET ADDRESS MONTGOMERY AL CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE TITLE LAYMAN, HAROLD E NAME NAME 4520 EXECUTIVE PARK DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MONTGOMERY AL ASSE Secretary Change ★ Addition ☐ Delete TITLE TITLE Robardy W. Blankenship 4520 Executive Adok Orive NAME NAME STREET ADDRESS STREET ADDRESS Montgomery, AL 36,116 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 other like empowered.

06 (334) 24 V – 4 000 tte Daytime Phone #