2000 UNIFORM BUSINESS REPORT (UBR) Jul 10, 2000 8:00 am DOCUMENT # P39192 **Secretary of State** Pykis Corporation 07-10-2000 90015 033 ***150.00 Mailing Address Principal Place of Business 00067118 Principal Place of Business 3. Mailing Address 3750 Torrey View Ct 3750 Torra View C+ Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 33-*023705*2 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 72121 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Corporation Service Company Street Address (P.O. Box Number is Not Acceptable) 1201 Hays St. Tallahassee FL 32301 Zip Code 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!IL FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 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 OFFICERS AND DIRECTORS 12. ☐ Delete TITLE Change Addition President NAME Stephen S. Thomas PPRANTA STREET ADDRESS 7000 Cordinal Place ST 710 CITY-ST-ZIP DUDIN, OH 43017 ☐ Delete Change Addition Yice President, Taxes TITLE NAME Glann L. Martin 7000 Carsinal Place AUDRESS STREET ADDRESS ST-ZIP CITY-ST-ZIP DUDIO, OH 43017 ☐ Delete ☐ Change ☐ Addition Treasurer TITLE NAME Stephen Sithomas COLL ADDRESS STREET ADDRESS 7000 Cardinal Place ST.ZIP CITY-ST-ZIP JUMIN, OH HEALT Change Addition Secretary ☐ Delete TITLE NAME Heven Alan Bennett 1000 Caranai Place MŲTIMĖŠŠ STREET ADDRESS ST-ZIP CITY-ST-ZIP Dublin, of 43017 ☐ Delete ☐ Addition Director John C. Kane Place KEEL ALTERNAS STREET ADDRESS CITY-ST-ZIP ST-ZIP Dublin, OH 43017 Addition ☐ Delete TITLE NAME ADDRESS STREET ADDRESS ST ZIP 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.

SIGNATURE:

| 19:00 | 104.757-5000|