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2000 UNIFORM BUSINESS REPORT (UBR) **FILED** DOCUMENT # P95000074424 Apr 24, 2000 8:00 am Secretary of State L B J SKY COMM., INC. 04-24-2000 90115 041 ***150.00 Principal Place of Business Mailing Address 21301 S TAMIAMI TRL 21301 S TAMIAMI TRL #320-305 #320-305 ESTERO FL 33928-2942 ESTERO FL 33928 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0608624 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 JUSTICE, BEVERLY J Street Address (P.O. Box Number is Not Acceptable) 21301 S TAMIAMI TRAIL #320-305 ESTERO FL 33928 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! 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 11. OFFICERS AND DIRECTORS 12. ☐ Change ☐ Addition TITLE □ Delete TITLE JUSTICE, BEVERLY J NAME NAME STREET ADDRESS 21301 S TAMIAMI TRL, #320-305 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ESTERO FL 33928 ☐ Addition ☐ Change TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Defete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE 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.

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BEVERLY J. JUSTICE 4-18-2000

Change

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