2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # P96000100870 Apr 26, 2000 8:00 am Secretary of State 1. Entity Name DUNWAL LEASE, INC. 04-26-2000 90066 034 ***150.00 Principal Place of Business Mailing Address PMB 152 PMB 152 222 LAKEVIEW AVENUE. SUITE 160 222 LAKEVIEW AVENUE, SUITE 160 WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401-6135 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-3422067 Not Applicable \$8.75 Additional Country Country Ζip Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name YOUNG, GREGORY E Street Address (P.O. Box Number is Not Acceptable) 250 ROYAL PALM WAY STE 300 PALM BEACH FL 33840 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. 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 Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition Change ☐ Delete TITLE TITLE YOUNG, GREGORY E NAME NAME 250 ROYAL PALM WAY, SUITE 300 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PALM BEACH FL CITY-ST-ZIP ☐ Addition DP Change ☐ Delete TITLE TITLE GERNULL, MICHAEL NAME NAME % DIREKT, FRANKONIA AG, FRIEDEN STRASSE #5 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **WURZBURG GE** ☐ Change ☐ Addition ☐ Delete TITI F SCOTT, MARK S NAME NAME STREET ADDRESS STREET ADDRESS C O WHITE CASE LLP CITY-ST-ZIP CITY-ST-ZIP **BOSTON MA** ☐ Addition ☐ Change TITLE TITLE BORMANN, ELMAR NAME NAME STREET ADDRESS %DIREKT, FRANKONIA, AG, FRIEDEN STRASSE #5 STREET ADDRESS CITY-ST-ZIP

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 of tustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if of the corporation or the receiver changed, or on an attachment

TITLE

NAME

TITLE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP

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TITLE

NAME

TITLE NAME wurzburg ge

☐ Delete

☐ Delete

4/21/2000

561-833-7700

☐ Change

☐ Change

■ Addition

☐ Addition