FILED 2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P96000103376 BLISS MCKNIGHT OF FLORIDA, INC. 04-27-2001 90317 040 ***150.00 Principal Place of Business Mailing Address 2801 EAST EMPIRE STREET ATTN: ROBERT MATHEWSON P.O. BOX 157 P.O. BOX 157 BLOOMINGTON IL 61702-0157 BLOOMINGTON IL 61702-0157 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 36-4157335 No! Applicable Country Zip Country Zip \$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 CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S PINE ISLAND RD PLANTATION FL 33324 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.

Apr 27, 2001 8:00 am Secretary of State

SIGNATURE Signature, typed or printed name of registered agent and title if app.cab.e. (NOTE: Registered Agent signature required whon reinstating) DATE								
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)		FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State		10. Election (Campaign Financing d Contribution.		D May Be to Fees	
11. OFFICERS AND DIRECTORS		12.		ADDITIONS/CHAN	IGES TO OFFICERS A	ND DIRECTORS	IN 1	
NAME	PD BLISS, JAMES I 2801 EAST EMPIRE STREET BLOOMINGTON IL 61704	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVPD MCKNIGHT, JOHN J 2801 EAST EMPIRE STREET BLOOMINGTON IL 61704	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			·	☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	VPST MATHEWSON, ROBERT E 2801 EAST EMPIRE STREET BLOOMINGTON IL 61704	☐ Delete	TITLE NAME STREET ACORESS CITY-ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MENTZER, ROBERT E 2801 EAST EMPIRE STREET BLOOMINGTON IL 61704	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZiP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP NAYLOR, DAN 2801 EAST EMPIRE STREET BLOOMINGTON IL 61704	□ Delete	TITLE NAME STREET ADORESS CITY-ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVP SHEPARD, ROBERT W 2801 EAST EMPIRE STREET BLOOMINGTON IL 61704	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		President	vida Statutaa I further	Change	Addition
is. Inereby	certify that the information supplied with th	us ming does not quality for tr	ie exemption stat	ea in Secti	on i ia.u/(3)(i), Fio	inua statutes, i turtner	certify that the t	mormation

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 clirector 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 attach) an address, with all other like empowered.