2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # P97000007226 Jul 24, 2000 8:00 am 1. Entity Name **Secretary of State** J.MARRONE, INC. 07-24-2000 90014 015 ***150.00 Principal Place of Business Mailing Address 1914 OAKDALE LANG N 7.0.BH608 -1914 OAKDALE LANE N GLEARWATER FL-33764 CLEARWATER FL 33764 2. Priperpal Place of Business DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3425822 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Name and Address of Current Registered Agent MARRONE, JOHN Street Address (P.O. Box Number is Not Acceptable) - STA DAKDALE LANEN P.O. BOLLOBB - SLEARWATER FL 39764 OZONA, FL ZALGOO 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 DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 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 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 0 ☐ Addition CR2E034 (5/00 Change Delete TITLE MARRONE, JOHN C. NAME NAME P.O. BX608 STREET ADDRESS 1914 OAKDALE LANE N STREET ADDRESS CITY-ST-ZIP **GLEARWATER FL 93**764 CITY-ST-ZIP ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP ☐ Addition Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 attachment with an attachment with all other like empowered.

Attachment D# pagooo9641 DW13819

i.Marrone, Inc.
IMAGE ENHANCEMENT, RESTAURANT DESIGN

P.O. Box 688 Ozona, Florida 34660 1-727-773-2150 1-727-773-2151 Facsimile

DIVISION OF CORPORATIONS
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: 2000 Uniform Business Report

To Whom It May Concern:

We have received a second notice for payment when in fact we never received the first notice.

We changed addresses in late January and I believe this may have contributed to the delay in our payment we expected to make the first of the year, given proper notice.

You will notice on the forms, enclosed, that the address has changed and a payment for the standard \$150.00 is also included.

We am in hopes that this error can be overlooked due to our change of business address and the \$150.00 is an acceptable payment in lieu of all the confusion with the mail.

Sincerely,

John Marrone