2001 UNIFORM BUSINESS REPORT (UBR)

May 10, 2001 8:00 am Secretary of State DOCUMENT # P97000022136 1. Entity Name CARTIS, INC. 05-10-2001 90161 012 ***150.00 Principal Place of Business Mailing Address 277 ROYAL POINCIANA WAY 277 ROYAL POINCIANA WAY STE 155 STE. 155 PALM BEACH FL 33480 PALM BEACH FL 33480 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 65-0737412 Not Applicable Zip Country Zip Country \$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 Name MINTMIRE, DONALD F Street Address (P.O. Box Number is Not Acceptable) 265 SUNRISE AVE, SUITE 204 PALM BEACH FL 33480 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 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, 2001 Fee will be \$550.00 *Tax filing requirement and elects to do so. Trust Fund Contribution. (See criteria on back) . . Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. TITLE ☐ Delete TITLE **PCEOD** ☐ Change ☐ Addition **GALLLON**X HERVEX NAME NAME Herve Gallion STREET ADDRESS 277 ROYAL POINCIANA WAX # 155 STREET ADDRESS 222 Royal Poiniana Way, Suite 155 CITY-ST-ZIP CITY-ST-ZIP RALMABEAGHAFILABA480xx Palm Beach, FL 33480 TITLE Change ☐ Addition TITLE □ Delete STCFOD HEITZLERIZGYRILXX NAME NAME Fernand Le Loroux STREET ADDRESS 27X; ROYAL POINCIANA WAY # 155 STREET ADDRESS 277-Royal Poinciana Way, Suite 155 CITY-ST-ZIP CITY-ST-ZIP Palm Beach, FL 33480-JATIN PATRICK 7 FOYAL POINCIANA ☐ Change ☐ Addition TITI F ☐ Delete TITLE NAME NAME Martial Vuillaume STREET ADDRESS STREET ADDRESS 277 Royal Poinciana Way, Suite 155 CITY-ST-ZIP CITY-ST-7IP Palm Beach, FL 33480 ☐ Delete ☐ Addition TITLE TITLE **SIXIMER: STEWE** Cyril Heitzler NAME NAME STREET ADDRESS 277 HOYAK POINCIANAXWAYX X#155X X STREET ADDRESS 277 Royal Poinciana Way, Suite 155 CITY-ST-7IP * CITY-ST-7IP **PALMXBEACHXFLX33480**XX Palm Beach, FL 33480 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME Patrick Martin STREET ADDRESS STREET ADDRESS 277 Royal Poinciana Way, Suite 155 CITY-ST-7IP CITY-ST-ZIP Palm BEach, FL 33480 ☐ Delete TITI E ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-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 erribowered.

SIGNATURE: