FILED FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 PROFIT FLGRIDA DEPARTMENT OF STATE May 26 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1997 **DIVISION OF CORPORATIONS DOCUMENT#** P97000078928 1. Corporation Name ARNOLD CONSULTING, INC. d.b.a. TLA CONSULTING Mailing Address Principal Place of Business 3. Date Incorporated or Qualified | 3a. Date of Last Report 9/11/97 N/A 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0773422 7110100 WEST SAMPLE RD. Not Applicable \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired 22 SUITE 313 Fee Required 27 \$5.00 May Be City & State 6. Election Campaign Financing City & State 23 CORAL SPRINGS, FL Trust Fund Contribution Added to Fees 28 This corporation has liability for intangible tax under s. 199.032, Country Country **24** 33065 Yes No रहा USA 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name CORPORATE ACCESS, INC. Street Address (P.O. Box Number is Not Acceptable) 1116-D THOMASVILLE ROAD 83 MOUNT VERNON SQUARE Zip Code TALLAHASSEE, FL 32303 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Addition TITLE President DELETE 1.1 TITLE Change MR. THOMAS L ARNOLD 1.2 NAME NAME 6232 NW 120TH DRIVE STREET ADDRESS 1.3 STREET ADDRESS CORAL SPRINGS, FL 33076 1.4 CITY - ST - ZIP CITY - ST - ZIP Secretary Addition TITLE 2.1 TITLE Change MR. GENE M. WILHOITE NAME 2.2 NAME 13550 PLEASANT COLONY DRIVE STREET ADDRESS 2.3 STREET ADDRESS MANASSAS, VA 22111 CITY - ST - ZIP 2.4 CITY - ST - ZIP Vice-Presedent MR. EDWARD V. TITLE 3.1 TITLE GREGORWICZ, JR. Change Addition NAME 3.2 NAME 9109 WOODSPICE LANE STREET ADDRESS 3 3 STREET ADDRESS LORTON, VA 22079 3.4 CITY - ST - ZIP CITY - ST - ZIP Vice-President MR. CLAUDE DAVIS 4.1 TITLE TITLE DELETE Change Addition NAME 4 2 NAME 6232 NW 120TH DRIVE STREET ADDRESS 4.3 STREET ADDRESS CORAL SPRINGS, FL 33076 4.4 CITY - ST - ZIP CITY - ST - ZIP TITLE 5.1 TITLE Change DELETE ☐ Addition 5.2 NAME NAME 700002538347 5.3 STREET ADDRESS STREET ADDRESS -05/28/98---01016---049 CITY - ST - ZIP 5.4 CITY - ST - ZIP ***165.00 6.1 TITLE TITLE Change DELETE Addition NAME 62 NAME **6.3 STREET ADDRESS** STREET ADDRESS CITY - ST - ZIP 6.4 CITY - ST - ZIP 14. I do 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 annual report or supplemental annual 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or an attachment with an address.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: