FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P9700093354 (3) RIVERWALK, INC. Principal Place of Business Mailing Address 71 E. CHURCH ST. 71 E. CHURCH ST. ORLANDO FL 32901 ORLANDO FL 32801 2. Principal Place of Business 2a. Mailing Address 21 26 Suite, Apt #, etc. Suite, Apt. #. etc. 22 27 City & State City & State 23 Zip Country 29 24 25 9. Name and Address of Current Registered Agent Name HOLSTON, ROBERT W

FILED Feb 11 1998 8:00am Secretary of State

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/30/1997 Applied For Not Applicable \$8.75 Additional Certificate of Status Desired Fee Required \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent 71 E. CHURCH ST. Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32801 City Zip Code 11. Pursuant to the provisions of Sections 607.05.02 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 Horida. 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 OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ DELETE 1.1 TITLE Change Addition TITLE NAME HOLSTON, ROBERT W 1.2 NAME 71 E. CHURCH ST. STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL 32801 CITY-ST-2IP 1.4 CITY-ST-ZIP DELE1E 2 1 TETLE Change Addition JUNE, ROHLAND II 2.2 NAME 71 E. CHURCH ST. STREET ADDRESS 2.3 STREET ADDRESS ORLANDO FL 32801 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 THLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY - ST - ZIP TITLE DELETE 4.1 TITLE Addition 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CiTY-ST-ZIP CITY-ST-ZIP DELETE 5.1 TITLE ☐ Change Addition TITLE NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-ZIP 54 CITY - ST - ZIP DELETE Change Addition TITLE 61 TITLE NAME 62 NAME STREET ADDRESS 6 3 STREET ADDRESS

14. Thereby 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 armual report or suppliemental armual 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 12 or Block 13 of changed or on an attachment with an address.

SIGNATURE:

7)839-6000