2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # 19900013651 T. Entity Name ENVIRONMENTAL Land Solutions INC CLHAY I AM ID: 08 Principal Place of Business
1626 Eagles Watch WAY
TAllahassee, FL 32312 Mailing Address SECRETARY OF STATE TALLAHASSEE, FLORIDA 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59 - 3000 Not Applicable Country \$8.75 Additional Zin Country Zip Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Robort & Ryals Jr 1626 Eagles Watch Way Tallahassee, FL 32312 Street Address (P.O. Box Number is Not Acceptable) Zip Code City FL 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. DATE (NOT Registered Agent skinature required when reinstating) 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, 20 11 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payat le to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS 11. CR2E034 (11/00) Robert C Ryals Jr Way 1626 Eagles Watch WAY Tallahassep FL 323, ☐ Addition Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS 323/2 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition □ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **80000421150%** - **A**dition -05/11/01--01042--015 TITLE ☐ Delete TITLE NAME NAME ****150.00 ****150.00 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with his filling does not qualify to the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental reports true and accurate and that it is 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 suppowered to execute this report is required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with ar SIGNATURE:

I Robert C Ryals did not receive My 2001 U.BR. For Environmental Land Solutions In'C. Wheat Ryde