2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P 99000065995 Aug 31, 2000 8:00 am Secretary of State 1. Entity Name VICKERS PLANTS OF WEST COAST FLITTIC. 08-31-2000 90007 001 ***150.00 Principal Place of Business Mailing Address PO BOX 1087 2108 53ED AVEE Bradunton 71 34203 ONECO, 71 34264 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0941134 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name -Phillip L VICKERS Street Address (P.O. Box Number is Not Acceptable) 237 magellan Dr (POBOX1087 Sara sota, FL 34243 (OnEco) 34269 Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOWIII FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10.-Election.Campaign Financing \$5.00 May Be-After MAY 1, 2000 Fee will be \$550.00 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. Addition ☐ Delete TITLE PRES Phillip L. VICKERS STREET ADDRESS STREET ADDRESS 237 magellan Dr CITY-ST-ZIP CITY-ST-ZIP Sarasoto FL 34264 Addition Change SEC ITKES ☐ Delete TITLE VICICIE YOUNG 6805 28311 St E NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE Mysika City 71 34251 ☐ Change Addition TITLE ☐ Delete 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-7IP Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF ☐ Change Addition Delete TITLE 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 empowered.

SIGNATURE: LUKE COLLY VICKIE YOUNG SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/18/00

941-755-4437

Daytime Phone #

P9900065995 DW8285U

VICKERS PLANTS OF WEST COAST FL, INC.

P.O.BOX 1087 Oneco, FL 34264 941-755-4437 FEI Number 65-0941134

August 28, 2000

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Dear Sir or Madam:

I am writing this letter to ask you to forgive the late filing fee. We never received our form due to an address error and we did not file before the May deadline. Please ____ consider this matter for us.

Sincerely,

Vickie Young

Secretary / Treasurer

Viekie Joung