

FILED
May 01, 2007 08:00 A
Secretary of State

<div style="display: flex; justify-content: space-between;"><div>DOCUMENT # S11668 1. Entity Name MCSWAIN ENGINEERING, INC.</div><div style="text-align: center;"></div></div>		<div style="display: flex; justify-content: space-between;"><div>May 01, 2007</div><div>08.00</div></div> <div style="text-align: right; font-size: 1.2em;">Secretary of State</div>									
<div style="display: flex; justify-content: space-between;"><div>Principal Place of Business 3320 MCLEMORE DR PENSACOLA, FL 32514 US</div><div>Mailing Address P O BOX 10888 PENSACOLA, FL 32524-0847 US</div></div>		<div style="text-align: center;"></div> <div style="display: flex; justify-content: space-around; font-size: 0.8em;">04302007No Chg-PCR2E034 (11/05)</div>									
DO NOT WRITE IN THIS SPACE		<table border="1" style="width:100%; border-collapse: collapse;"><tr><td style="width:80%;">4. FEI Number 59-3036239</td><td style="width:20%;">Applied For <input type="checkbox"/> Not Applicable</td></tr><tr><td colspan="2">5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required</td></tr></table>		4. FEI Number 59-3036239	Applied For <input type="checkbox"/> Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required					
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6. Name and Address of Current Registered Agent WELLS, V. KEITH 4300 BAYOU BLVD PENSACOLA, FL 32504		DO NOT WRITE IN THIS SPACE									
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. I am familiar with, and accept the obligations of registered agent.											
<div style="display: flex; justify-content: space-between;"><div>SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small></div><div>(NOTE: Registered Agent signature required when reinstating)</div><div>DATE _____</div></div>											
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees									
10. OFFICERS AND DIRECTORS		<div style="font-size: 1.2em; margin-bottom: 10px;">000000750030</div> <div style="font-size: 1.2em; margin-bottom: 10px;">05/18/07-80048-001 150.00</div> <div style="font-size: 1.5em; font-weight: bold;">DO NOT WRITE IN THIS SPACE</div>									
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.											
SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<div style="display: flex; justify-content: space-between;"><div>30 APR 07 <small>Date</small></div><div>850-484-0506 <small>Daytime Phone</small></div></div>									