FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CITY-ST-ZIP

SIGNATURE:

PROFIT May 07 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT #
1. Corporation Name (3)S79651 H&W RESOLUTION, INC. Principal Place of Business Mailing Address 501 BRICKELL KEY DR 501 BRICKELL KEY DR SUITE 200 MIAMI FL 33131 MIAMI FL 33131 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/11/1991 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 501 Brickell Key Drive 501 Brickell Key Drive 65-0293728 Not Applicable Suite, Apt. #, etc.
Suite 602 Suite, Apt. #, etc. Suite 602 \$8.75 Additional 5. Certificate of Status Desired \Box 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Miami, FL Miami, 23 Trust Fund Contribution Added to Fees Zφ Country Country 8. This corporation owes or has paid the current year Intangible 25 USÁ 33131 33131 USA 24 29 Yes Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 NATIONAL REGISTERED AGENTS INC. NATIONAL REGISTERED AGENTS INC 701 BRICKELL AVE Address (P.O. Box Number is Not Acceptable)
501 Brickell Key Drive 82 STE 1800 83 **MIAMI FL 33131** Suite 602 84 Zip Code Miam1 33131 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** Signature, typed or preded name of registered agent and ette if applicable (NOTE: Registered Agent signalu DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1 1 TITLE Change WHISENAND, JAMES D. NAME 1.2 NAME WHISENAND, JAMES D. 701 BRICKELL AVE STE 1800 501 Brickell Key Drive, STE602 Miami, FL 33131 STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 21 TITLE Change ___ Addition NAME 2.2 NAME STREET ADORESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE Change Addition 3 1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY - \$T - ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 51 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE ☐ Change Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS**

6.4 CITY - ST - ZIP 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 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 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 if changed, or on an attachment with an address.

4/15/40

FILED