I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: THERESA KIMBLE-GRIMES

Electronic Signature of Signing Officer/Director Detail

689 REILLYS ROAD PORT ORANGE, FL 32127 Current Mailing Address:

Current Principal Place of Business:

689 REILLYS ROAD PORT ORANGE, FL 32127

DOCUMENT# P09000082777

FEI Number: 27-1085345

Name and Address of Current Registered Agent:

KIMBLE-GRIMES, THERESA A 689 REILLYS ROAD PORT ORANGE, FL 32127 US

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: THERESA A KIMBLE-GRIMES

Electronic Signature of Registered Agent

Officer/Director Detail :

TitleP, TNameKIMBLE-GRIMES, THERESA AAddress689 REILLYS ROADCity-State-Zip:PORT ORANGE FL 32127

Entity Name: PROFESSIONAL PROJECT MANAGEMENT, INC.

FILED Mar 29, 2016 Secretary of State CC9612120674

Certificate of Status Desired: No

03/29/2016 Date

Date

03/29/2016

PRESIDENT