2001 UNIFORM BUSINESS REPORT (UBR) **FILED** Mar 22, 2001 8:00 am Secretary of State **DOCUMENT # L97690** 1. Entity Name OAK HILL ACQUISITION, INC. 03-22-2001 90072 015 ***150.00 Principal Place of Business Mailing Address P.O BOX 750 ONE PARK PLAZA NASHVILLE TN 37202 NASHVILLE TN 37203 000283872. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 62-1466044 Not Applicable \$8.75 Additional Zip Country Country Zip 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PRENTICE HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) **1201 HAYS ST** SUITE 105 TALLAHASSEE FL 32301 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. 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, 2001 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 12. 11. ☐ Change ☐ Addition ☐ Delete TITLE TITLE BLACKWOOD, DORA A NAME NAME STREET ADDRESS STREET ADDRESS ONE PARK PLAZA CITY-ST-ZIP CITY-ST-ZIP NASHVILLE TN ☐ Addition TITLE ☐ Change TITLE AS ☐ Delete NAME DENSON, DAVID L NAME STREET ADDRESS STREET ADDRESS ONE PARK PLAZA CITY-ST-ZIP CITY-ST-ZIP **NASHVILLE TN 37203** ☐ Change ☐ Addition ☐ Delete TITI F TITLE MOORE, A. BRUCE NAME STREET ADDRESS STREET ADDRESS ONE PARK PLAZA CITY-ST-ZIP CITY-ST-ZIP NASHVILLE TN 37203 Change ☐ Addition ☐ Delete TITLE DVP TITLE NAME JOHNSON, R. M NAME STREET ADDRESS STREET ADDRESS ONE PARK PLAZA CITY-ST-ZIP CITY-ST-7IP NASHVILLE TN ☐ Change ☐ Addition ☐ Delete TITLE TITLE DVPS NAME NAME FRANCK, JOHN M STREET ADDRESS STREET ADDRESS ONE PARK PLAZA CITY-ST-ZIP CITY-ST-ZIP NASHVILLE TN ☐ Change ☐ Addition TITLE VΡ ☐ Delete TITLE NAME GRUBBS, RONALD LEE NAME STREET ADDRESS STREET ADDRESS ONE PARK PLAZA

NASHVILLE TN 37203 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.

David Denson

CITY-ST-7/P

SIGNATURE:

CITY-ST-ZIP

Assistant Secretary GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR