F100000000967

URAI - (Jon miles)						
(Requestor's Name)						
Mark Twain Plaza 1 (Address)						
0/ West Vandalia St. (Address) (Address)						
Edwardsville 20 62025						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
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2011 MAY 23 PM PS 3

Office Use Only

R.A.

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Corporate Filing Transmittal Form

To: Order #:	Secretary of State of FL COA-SL111547	From: Date:	Jon Miles May 17, 2011	
Towns N-			• •	Dom !
Target Name InPwr, Inc.				Dom Ju
illewt, it	IC.			118
Attached 1	for filing, please find the following:			
- 	Change of Re	gistered Agent		
Please ret	urn the original evidence to the foll	owing:		
Jon Miles				
	oorate Services, Inc. Vandalia Street, Suite 245			
	ille, IL 62025			
<u>.</u>				
Special In:	structions/Notes:			
Please Ser	ıd Via:			
	Fax:	☐ FedEx		

Please contact us at (866) 416-6274 with any questions, problems or delays. Thank you for your assistance!

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida S statement of change is submitted for a corporation organized under the laws of the State of $\underline{\underline{}}$ in order to change its registered office or registered agent, or both, in the State of $\underline{}$	Indiana
1. The name of the corporation: InPwr, Inc.	
2. The principal office address: 10640 Deme Drive, Suite M, Indianapolis, IN 46.	236
3. The mailing address (if different):	
4. Date of incorporation/qualification: 2/23/10 Document number: F	1000000967
 The name and street address of the current registered agent and registered office on file wit Florida Department of State: (If resigned, enter resigned) 	th the
CT Corporation System	-
1200 South Pine Island Road	7A S 28
Plantation, FL 33324	ZBII WY 23 SECRETARY TALLAHASS
6. The name and street address of the new registered agent (if changed) and /or registered official (if changed):	~~~
NRAI Services, Inc.	PH Z: 34 OF STATE
515 East Park Avenue	
P.O. Box NOT acceptable Tallahassee, FL 32301	
The street address of its registered office and the street address of the business office of its as changed will be identical.	s registered agent,
Such change was authorized by resolution duly adopted by its board of directors or by an authorized by the board, or the corporation has been notified in writing of the change.	officer so
Signature of an officer or director Brian Inskeep, Pre Printed or typed name and tit	sident le
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and composition of my duties, and I am familiar with and accept the obligation of my position as registered accument is being filed merely to reflect a change in the registered office address, I hereb corporation has been notified in writing of this change. NRAL Services, Inc. by: Signature of Registered Agent Date Date	plete performance d agent. Or, if this ny confirm that the
If signing on behalf of an entity:	
Sean L. Emerick, Asst. Secy. Typed or Printed Name	

* * * FILING FEE: \$35.00 * * *