F20000005576

(Requ	estor's Name)	
(Addre	ess)		
(Addre	ess)		
(City/S	State/Zip/Phor	ne #)	
PICK-UP	☐ WAIT	MAIL	
(Busir	ness Entity Na	me)	
(Document Number)			
Certified Copies	Certificate	es of Status	
Special Instructions to Fil CALLED PERMISSION GIVEN TO C DOCUMENT BY ON THIS DATE	CORDECT	HEKURI O	

Office Use Only



500355871825

12/11/20--01022--017 **87.50

FILED 2020 DEC 11 PM 5: 43

★. SALY

DEC 1.4 2023

COVER LETTER

TO: Registration Section Division of Corporati	ons		
SUBJECT: Computer Power	Group Inc		
	Name of corporation -	must include suffix	
Dear Sir or Madam:			
The enclosed "Application by "Certificate of Existence," or above referenced foreign corp	"Certificate of Good Stand	ing" and check are subr	t Business in Florida." nitted to register the
Please return all corresponden	ce concerning this matter t	o the following:	
	Vidya Chek	uri	
	Name of Po	rson	
	Computer Power (roup Inc	
	Firm/Comp	any	
	8384 Baymeadow	s rd Ste 11	
	Addres	S	
	Jacksonville "Fl	. 32256	
	City/State and	Zip code	
pvidya@cpg-inc.com			
E-r	nail address: (to be used for	future annual report no	otification)
For further information concer	ming this matter, please cal	1:	
Vidya Chekuri	408 at (7188159	
Name of Person	Area Code	Daytime Teleph	one Number
STREET/COURIER Registration Section Division of Corporatio The Centre of Tallaha 2415 N. Monroe Stree Tallahassee, FL 3230	ons ssee t. Suite 810	MAILING AE Registration Se Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations
	ORIDA DEPARTMENT O	OF STATE 878.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status &

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503. FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Computer Powe				
(Enter name of e "Inc.," "Co.," "C	corporation; must include "IN Yorp," "Inc," "Co," or "Corp."	<pre><!-- CORPORATED." "(")</pre--></pre>	COMPANY," "CORPORATIO	N,"
Computer Powe	er Group USA Inc			
(If name unavail	able in Florida, enter alterna	te corporate name ado	pted for the purpose of transacting	ng business in Florida)
Delaware 2.		3 20	20-0030749	
	ry under the law of which it i	is incorporated)	(FEI number, if applicable)	
4.	93 June 2003	5		
	of incorporation)		(Date of duration, if other than perpetual)	
6.	Dec 2	1 2020		
			orida, if prior to registration) F.S., to determine penalty liabil	ity)
7.	8384 Baymeado	ows rd Ste 11. Jackson	nville ,FL 32256	
		(Principal office s	street address)	元高
		(Current mailing a	ddress, if different)	7
				HASSEST FLORIO
8. Name and stree	et address of Florida regis	tered agent: (P.O. B	lox NOT acceptable)	
Name:	Vidya Chekuri			
Office Address:	8384 Baymeadows rd ,Su	nie 11	_	<u>0</u>
	Jacksonville		Florida <u>32256</u>	
	(City	')	(Zip code)	
Having been nam designated in this further agree to c	application, I hereby acc	cept the appointmen s of all statutes rela	of process for the above state t as registered agent and agr tive to the proper and comple on as registered agent.	ee to act in this capacity. I
_	(Re	U VILLY egistered agent's signa	iture)	
10. Attached is a	certificate of existence du	ly authenticated, no	t more than 90 days prior to de	elivery of this application to

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

A, DIRECTORS						
Chairman	Name:	□Chairman	Name:			
■Vise Chairman	Address: 405 MallowBranch dr,St Johns FL	□Vice Chairman	Address:			
Director	Suri Chekuri	Director				
President	Vidya Chekuri	□President				
■Vice President	Suri Chekuri	□Vice President				
Secretary	■Treasurer	☐Secretary		☐Treasurer		
□Other	□Other	Other		□Other		
□Chairman	Name:	□ Chairman	Name:	· · · · · · · · · · · · · · · · · · ·		
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director		□Director				
□President		□President				
□Vice President		□Vice President		50.0		
□Secretary	☐ Treasurer	☐ Secretary		□Treasurer		
Other	Other	Other		□Other		
□Chairman	Name:	□Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:	<u> </u>		
□Director		□Director				
□President		□President				
□Vice President		□Vice President				
□Secretary	□Treasurer	□Secretary		□Treasurer		
□Other	□Other	□Other		□Other		
individuals may be	Use an attachment to report more than six (6). The attachment to report more than six (6). The attachment and the state of	ent of State Annual Re	ed for reporting p eport form.	urposes only. Non-indexed		
12.	Signature of Director of	or Officer		· · · · · · · · · · · · · · · · · ·		
The officer or dire	ctor signing this document (and who is listed in numberalse information submitted in a document to the Depart	er 11 above) affirms th	nat the facts state utes a third degre	d herein are true and that he o e felony as provided for in		
13	(Typed or printed name and capacity of pers	., Vice hehr	(J			
(Typed or printed name and capacity of person signing application)						



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "COMPUTER POWER GROUP INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

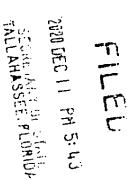
OF THIS OFFICE SHOW, AS OF THE ELEVENTH DAY OF SEPTEMBER, A.D.

2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "COMPUTER POWER GROUP INC." WAS INCORPORATED ON THE THIRD DAY OF JUNE, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.





Authentication: 203637284

Date: 09-11-20

3665322 8300 SR# 20207221996