Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000003640 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

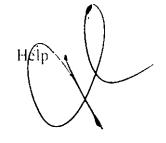
Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN CROWLEY NEW ENERGY, INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

Electronic Filing Menu Corporate Filing Menu



PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607,1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)

F21000	0001048			
	(Document number of corporation (if	known)		
CROWLEY NEW ENERGY, INC.				
(Name of cor	poration as it appears on the records of t		te)	
Delaware	3,02/19/20:	21		
(Incorporated under la	ws of) (D	ate authorized to do b	usiness in Florida	а)
(4-7 (SECTION II COMPLETE ONLY THE APPLICAB	LE CHANGES)		
If the amendment changes the name of the incorporation? 1/3/2023	corporation, when was the change effect		its jurisdiction of	
Crowley Advanced Energy, Inc.				
(Name of corporation after the amendmen not contained in new name of the corporat	t, adding suffix "corporation," "company ion)	c," or "incorporated,"	or appropriate ab	breviation. 2023
(If new name is unavailable in Florida, ente	er alternate corporate name adopted for t	he purpose of transact	ting business in F	lórida)
6. If the amendment changes the period	of duration, indicate new period of durat	ion.		+
		<u> </u>		= :
	(New duration)		· .	AH 10: 59
7. If the amendment changes the jurisdic	tion of incorporation, indicate new juris	diction.		
-	(New jurisdiction)		-	
. If amending the registered agent and/or new registered agent and/or the new reg		nter the name of the	<u>-</u>	
Name of New Registered Agent				
	(Florida street address)			
New Registered Office Address:	(City)	Florida_	(Zip Code)	_
New Registered Agent's Signature, if cl	hanaina Revistered Avent			
Thereby accept the appointment as registe	red agent. I am familiar with and acce _t	pt the obligations of t	he position.	
Signature of New Regist	ered Agent, if changing			

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

	Title/ Capacity	<u>Name</u>	Address	Type of Action	
				DAdd	
				□Remove	
Dadd PRemove Dadd Data Data				□Add	
				©Remove	
DAdd DAH 100 Compose Compo					
DAdd CT Properties				□ Псточе	
DAdd CT Properties				2023 JAH 	, ·
DAdd CT Properties				□Remove A	اده د از ما ای
10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurunder the laws of which it is incorporated.				nader of	
				••-	
110	10. Attached is a confidence of the application under the laws			more than 90 days prior to de of corporate records in the jurise	:liver lictio
			Martine or other afficer - if in the hand	is of	
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)			rt appointed fiduciary, by that fiduciary)	a VI	
Kevin Dutcau Attorney-in-Fact (Typed or printed name of person signing) (Title of person signing)					

Q 01/04/2023 9:06 AM 15612148442 → 18506176380 pg 4 of 5



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "CROWLEY NEW ENERGY, INC.", CHANGING ITS NAME FROM "CROWLEY NEW ENERGY, INC." TO "CROWLEY ADVANCED ENERGY, INC.", FILED IN THIS OFFICE ON THE THIRD DAY OF JANUARY, A.D. 2023, AT 12:46 O'CLOCK P.M.



Authentication: 202416174

Date: 01-04-23

5935835 8100 SR# 20230023743 State of Delaware
Secretary of State
Division of Corporations
Delivered 12:46 PM 01/03/2023
FILED 12:46 PM 01/03/2023
SR 20230010592 - File Number 5935835

STATE OF DELAWARE STATE OF DELAWARE CERTIFICATE OF AMENDMENT OF CROWLEY NEW ENERGY, INC.

Crowley New Energy, Inc., a corporation organized and existing under the General Corporation Law of the State of Delaware (the "Corporation"), does hereby certify as follows:

FIRST: That the following resolution was duly adopted by a unanimous vote of the Board of Directors of the Corporation, approving an amendment to the Certificate of Incorporation of the Corporation:

RESOLVED, that the Board declares it advisable and in the best interests of the Corporation to change the name of the Corporation to "Crowley Advanced Energy, Inc." and that the Board does hereby authorize and approve an amendment to the Certificate of Incorporation of the Corporation changing the Article thereof numbered "First" so that, as amended, said Article shall be and read as follows:

First:	The name of this Corporation is Crowley Advanced Energy, Inc.	

SECOND: The foregoing amendment to the Certificate of Incorporation of the Corporation shall take effect upon filing of this Certificate of Amendment with the Delaware Secretary of State.

THIRD: The foregoing amendment to the Certificate of Incorporation of the Corporation was duly adopted in accordance with the provisions of Section 242 of the General Corporation Law of the State of Delaware.

FOURTH: All other provisions of the Certificate of Incorporation of the Corporation shall remain in full force and effect.

IN WITNESS WHEREOF, the Corporation has caused this certificate to be signed this 3rd day of January 2022.

By: Ree	ce B. Alford
Title: Co	rporate Secretary
	au a
Name: _	NY S
	(Print or Type)