# F2400000983

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, , , , , , , , , , , , , , , , , , ,
(Document Number)
,
Certified Copies Certificates of Status
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2024 FEB -5 PH 12: 29



Karen A. Tobin <a href="mailto:ktobin@amundsendavislaw.com">ktobin@amundsendavislaw.com</a> (815) 337-5026

February 1, 2024

VIA FEDERAL EXPRESS
Florida Secretary of State
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe St Suite 810
Tallahassee FL 32303

Re: Chint Power Systems America Co.

Our Matter No.: 3034754

To Whom It May Concern:

Enclosed please find the Foreign Registration Statement for Chint Power Systems America Co along with a Certificate of Fact dated 1.31.24 and check for 70.00 for the filing of the same. Thank you for your attention to this matter. Should you have any questions, please do not hesitate to contact me at 815/337-5026.

Sincerely,

Karen A. Tobin

**Enclosures** 

### **COVER LETTER**

Divis	tration Section ion of Corporations				
SHBJECT:	Chint Power Systems America	ı Co.			
SOBOLCI.	Name o	f corporation - I	must include suffix		
Dear Sir or M	adam:				
"Certificate of	"Application by Foreign Corf Existence," or "Certificate of ced foreign corporation to tra	of Good Standii	ng" and check are subm	Business in Florida," itted to register the	
Please return	all correspondence concernit	ng this matter to	the following:		
Karen Tobin					
_		Name of Pe	rson		
Amundsen Dav	vis LLC				
		Firm/Compa	iny		
475 W. Terra 0	Cotta Suite C1				
		Address			
Crystal Lake II	L 60014				
		City/State and	Zip code		
ktobin@amun	dsendavislaw.com			·	
	E-mail address	: (to be used for	future annual report no	tification)	
For further in	formation concerning this m	atter, please cal	1:		
Karen Tobin		815	Code Daytime Telephone Number		
Nam	e of Person	Area Code	Daytime Telepho	one Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a Please make c  \$\Boxed{S70.00} \text{ Filler}	check for the following amount of the check payable to: FLORIDA DI S78.75 Filin Certificate of	EPARTMENT C g Fee & □	OF STATE \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy	

## 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.

Chint Power Sys	stems America Co.			
	orporation; must include "INCORPORATED, orp," "Inc," "Co." or "Corp.")	" "COMPANY," "CORPORATION	N."	
(If name unavails	able in Florida, enter alternate cornorate name	adopted for the purpose of transacting	ng business in Florida)	
Texas	f name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Flori exas 27-3886840			
	y under the law of which it is incorporated)	(FEI number, if applicable)		
10.20.2010		•	•	
	of incorporation) 5.	(Date of duration, if other	than perpetual)	
(17ACC	of meory, manority	(Butter de boutenament de boutenament)	,,	
	(Date first transacted business i (SEE SECTIONS 607.1501 & 607.1	n Florida, if prior to registration) 502, F.S., to determine penalty liabili	ity)	
1380 Presidential	Dr. #100, Richardson TX 75081-7508			
		ice <u>street</u> address)		
	(Current maili	ng address, if different)		
Name and street	et address of Florida registered agent: (P.C	D. Box NOT acceptable)	<b>202</b>	
Name:	Corporation Service Company		TALLAHA	
	1201 Hays Street	<del></del>		
Office Address:	Tallahassee	Florida 32301	FILED  24 FEB -5 PM 12: 29  CLANASSEE, FLORID	
	(City)	(Zip code)	PM 12: 2!	
Registered age	ent's acceptance:		R. 10 € 10 € 10 € 10 € 10 € 10 € 10 € 10	
laving been namesignated in this arther agree to c	ned as registered agent and to accept served application, I hereby accept the appointmentally with the provisions of all statutes or with and accept the obligations of my possible accept the obligations of my possible accept the obligations of my possible acceptance acceptanc	ment as registered agent and agr relative to the proper and comple	d corporation at the place ree to act in this cupacity. He performance of my dut	
	Corporation Service Compa	nny		
	Du Launal Biotach			
_	By: Laurel Bistach (Registered agent's s	signature)	<del></del>	
O Attached ic a	certificate of existence duly authenticated		lelivery of this application	
o. Attached is a	certificate of existence daily administration	,	, ,,	

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

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

A. DIRECTORS					
<b>■</b> Chairman	Er Nan Name:	□Chairman	Name: Zhigao Lai		
□Vice Chairman	Address: 2188 Pomona Blvd.	□Vice Chairman	Address: 2188 Pomona Blvd Pomona CA 91768		
Director	Pomona, CA 91768	Director			
President		□President	•		
□Vice President		□Vice President			
■ Secretary	<b>■</b> Treasurer	□Secretary		□Treasurer	
Other	□ Other	□Other		□Other	
□Chairman	Jaizhi Han Nume:	□Chairman	Name:		
	2188 Pomona Blvd.	□Vice Chairman			
Director	Pomona CA 91768	Director			
□President		□President			
□Vice President		□Vice President			
□Secretary	☐ Treasurer	☐ Secretary		□Treasurer	
□Other	Other	Other	<del></del> .	Other	
□Chairman	Mei Zhou	□Chairman	Name:	20	
	2188 Pomona Blvd	□Chairman □Vice Chairman	Address:	7 -	
■ Director	Pomona CA 91768	□Director		B-5	
□President		□President		THE R I	
□Vice President		□Vice President		7: No. 12: No.	
☐ Secretary	□Treasurer	□ Secretary		Or <b>©</b> □Preasurer	
□Other	□Other	□Other		□Other	
individuals may b	Use an attachment to report more than six (6). The attace added to the index when filing your Florida Departme	nt of State Annual R	eport form.		
12	Signature of Director o	r Officer			
The officer or dire she is aware that f s.817.155, F.S. Er Nan, Pre	ector signing this document (and who is listed in number alse information submitted in a document to the Depart esident	r 11 above) affirms the ment of State constitu	hat the facts stated utes a third degree	d herein are true and that he or e felony as provided for in	

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Jane Nelson Secretary of State

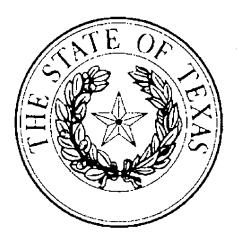
## Office of the Secretary of State

#### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Chint Power Systems America Co. (file number 801333173), a Domestic For-Profit Corporation, was filed in this office on October 20, 2010.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on January 31, 2024.



Jane Melson

Jane Nelson Secretary of State