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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WIND POWER SYSTEMS, LLC

(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Articles of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

EDWARD C. MUNGENAST

(Name of Person)

WIND POWER SYSTEMS, LLC

(Firm/Company)

512 NE 6 AVENUE

(Address)

DEERFIELD BEACH, FL 33441

(City/State and Zip Code)

For further information concerning this matter, please call:

CHRISTOPHER B. KNOX

(Name of Person)

at (954) 476-9997

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

