Page 1 of 1

Division of Corporations

0001514

Florida Department of State

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.

(((H14000257279 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)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA00000023 Phone : (850) 222-1092 Fax Number : (850)878-5368

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

Email Address:

LLC REGISTERED AGENT CHANGE POWER SYSTEMS MFG., LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

NOV 0 5 2014

COVER LETTER

Name of Limited Liability Company Dear Sir or Madam: The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Tracy Archer Name of Person Alstom Inc. Firm/Company 801 Pennsylvania Avenue, NW, Suite 855 Address Washington, D. C. 20004 City/State and Zip Code tracy archer@power.alstom.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Person Area Code & Daytime Telephone Numbors STREET/COURIER ADDRESS: Registration Section Division of Corporations Cilifon Building P.O. Box 6327 Tallahassee, Florida 32314	POWER SYSTEMS MFG., LLC	
Dear Sir or Madam: The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Tracy Archer Name of Person Alstorn Inc. Firm/Company 801 Pennsylvania Avenuc, NW, Suite 855 Address Washington, D. C. 20004 City/State and Zip Code tracy.archer@power.alstom.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Person Area Code & Daytime Telephone Numb STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 Exclosed is a check for the following amount:	SUBJECT:	of Limited Lishility Company
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filling. Please return all correspondence concerning this matter to the following: Tracy Archer Name of Person Alstom Inc. Firm/Company 801 Pennsylvania Avenue, NW, Suite 855 Address Washington, D. C. 20004 City/State and Zip Code tracy.archer@power.alstom.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (· ·	of Emilian Elabrity Company
Please return all correspondence concerning this matter to the following: Tracy Archer Name of Person Alstorn Inc. Firm/Company 801 Pennsylvania Avenue, NW, Suite 855 Address Washington, D. C. 20004 City/State and Zip Code trucy.archer@power.alstom.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Person Area Code & Daytime Telephone Numb STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building P.O. Box 6327 Tallahassee, Florida 32301 Exclosed is a check for the following amount:	Dear Sir or Madam:	
Name of Person Alstom Inc. Firm/Company 801 Pennsylvania Avenue, NW, Suite 855 Address Washington, D. C. 20004 City/State and Zip Code truey archer@power.alstom.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Person Area Code & Daytime Telephone Numb STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 Enclosed is a check for the following amount:	The enclosed Registered Agent/Registered Office	ce Change and fee(s) are submitted for filing.
Name of Person Alstorn Inc. Firm/Company 801 Pennsylvania Avenue, NW, Suite 855 Address Washington, D. C. 20004 City/State and Zip Code tracy archer@power alstom com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (Please return all correspondence concerning this	matter to the following:
Alstom Inc. Firm/Company 801 Pennsylvania Avenue, NW, Suite 855 Address Washington, D. C. 20004 City/State and Zip Code tracy archer@power.alstom.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (Tracy Archer	•
Firm/Company 801 Pennsylvania Avenue, NW, Suite 855 Address Washington, D. C. 20004 City/State and Zip Code tracy archer@power.alstom.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (Name of Person	
Address Address Washington, D. C. 20004 City/State and Zip Code tracy.archcn@power.alstom.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (Alstorn Inc.	
Address City/State and Zip Code tracy.archen@power.alstam.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (Firm/Company	
City/State and Zip Code tracy.archer@power.alstom.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (801 Pennsylvania Avenue, NW, Suite 855	
City/State and Zip Code tracy archer@power.alstom.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (Washington, D. C. 20004	
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (City/State and Zip Code	
Name of Person STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clift	tracy.archer@power.alstom.com	
Name of Person Name of Person Area Code & Daytime Telephone Numb STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 Enclosed is a check for the following amount:	E-mail address: (to be used for future annu	al report notification)
Name of Person Area Code & Daytime Telephone Numb STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 Enclosed is a check for the following amount:	For further information concerning this matter, p	olease calt:
Name of Person Area Code & Daytime Telephone Numb STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 Enclosed is a check for the following amount:	<i>;</i> : .	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 Enclosed is a check for the following amount:	Name of Person	- V
Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 Enclosed is a check for the following amount:	,	
Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 Enclosed is a check for the following amount:		= · - ·
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount:		
Enclosed is a check for the following amount:		P.O. Box 6327
		Tallahassee, Florida 32314
□ \$25 Filing Fee & Certified Copy	Enclosed is a check for the following a	mount:
	□ \$25 Filing Fee	□ \$55 Filing Fee & Certifled Copy

u :

1

INHS18 (2/14), i i i i

FLOIS - 92042014 Welliam Khawar Claims

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. POWER SYSTEMS MFG., LLC Name of the limited liability company: 2. (a) **(b)** Principal office address of limited liability company: Mailing address of limited liability company: (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX) 200 GREAT POND DR. 200 GREAT POND, P.O. BOX 500 WINDSOR, CT 06095 WINDSOR, CT 06095 03/14/2007 M07000001514 3. Date of filing/registration in Florida 4. Document number CORPORATION SERVICE COMPANY 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: (MUST BE FLORIDA STREET ADDRESS) Registered Office Address 1201 HAYS STREET TALLAHASSEE 32301 C T Corporation System **(b)** Enter name of NEW Registered Agent and/or NEW Registered Office address: 11 **NEW** Registered Office Address: 1200 South Pine Island Road FL 33324 Plantation If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Rose Song, Attorney-in-Fact Signature of a member or authorized representative of a member Printed or typed name of signee I hereby accept the appointment as registered ogent and agree to act in this capacity. I further agree to comply with the provisions of all statules relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

CT Comporation System

Judith Argso Signature of Registered Agent Vice President.

ned Assistant Secretary Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: \$25.00

POWER OF ATTORNEY

NOTICE IS HEREBY GIVEN THAT ALSTOM Inc., a corporation incorporated under the laws of the state of Delaware and the direct or indirect owner of the subsidiary entities shown on Schedule A attached hereto, does hereby appoint Todd Proper, Rose Song, John Flynn, employees of CT Corporation and acting solely in the capacity as employees of CT Corporation, as attorney-in-fact for the corporation to act for the corporation and in the corporation's name for the limited purposes authorized herein.

The corporation and the subsidiary entitles listed, having taken all necessary steps to authorize the changes, hereby grants its attorney-in-fact the power to execute the documents necessary to change the corporation's and the subsidiary entities' registered agent and registered office, or the agent and office of similar import, in any state to CT Corporation, as directed and authorized by the corporation.

In the execution of any documents necessary for the sole, limited purpose, set forth herein, Todd Proper, Rose Song, John Flynn, shall exercise the power of Vice President, Secretary, Manager, and/or Member.

This Power of Attorney expires when revoked by the undersigned

IN WITNESS WHEREOF the undersigned has executed this Power of Attorney on this October 28, 2014

Alstom Power Inc.

A Delaware-Corporation

Name: Amy Ericson
Title: President

State of Pennsylvania Destroit of Cotoning County of Philadelphia Westmarten

On October 28, 2014 before me, the undersigned, a Notary Public in and for said State, personally appeared Amy Ericson, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me he/she/they executed the same in his/her/their authorized capacity (ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed this instrument.

Witness my hand and official seal.

Vame: Iracy Archar

District of Columbia: SS

Subscribed and Sworn to before me.

this 25 'n day of October

Tracy L. Archer, Notary Public, D.C. My commission expires January 14, 2018

SCHEDULE A

Adams Wind Generations, LLC

Alskaw LLC

Alstom Boilers US LLC

Alstom Energy US LLC

Alstom Grid Inc.

Alstom Inc.

Alstom Maintenance Inc.

Alstom Power Conversion Inc.

Alstom Power Inc.

Alstom International Inc.

Alstom Power Turbomachines LLC

Alstom Renewable US, LLC

Alstom Signaling Inc.

Aistom Transport Holdings US Inc.

Alstom Transportation Inc.

Alstom Wind Texas LLC

APCOMPOWER Inc.

Danielson Wind Farms, LLC

Meeker County Wind Investments LLC

Power Systems MFG., LLC

Sigma Energy Solutions Inc.

Utility Integration Solutions, Inc.

Alstom Power International Inc.