

PO3000001862

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(Address)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: INTERBAY Power Systems, INC.
Name of Corporation

DOCUMENT NUMBER: P03000001862

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MICHAEL BLOM

Name of Contact Person

Firm/Company

P.O. Box 8911

Address

MADEIRA BEACH, FL 33738

City/State and Zip Code

M.A. BLOM @ GMAIL . COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MICHAEL BLOM

Name of Contact Person

at (727) 463 3516

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FL 32301
SECRETARY OF STATE

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: INTERBAY POWER SYSTEMS, INC.
2. The principal office address: 10532 66th AVE
SEMINOLE, FL 33772
3. The mailing address (if different): P.O. Box 8911
MADEIRA BEACH, FL 33738
4. Date of incorporation/qualification: JAN. 7, 2003 Document number: P03000001862
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

MICHAEL A. BLOM
126 146th AVE
ST. PETERSBURG, FL 33708

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

MICHAEL A. BLOM
10532 66th AVE
SEMINOLE, FL 33772

P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.



Signature of an officer or director

MICHAEL A. BLOM, President

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.



Signature of Registered Agent

NOVEMBER 12, 2014

Date

If signing on behalf of an entity:

Typed or Printed Name

*** FILING FEE: \$35.00 ***