P04000156637

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: POWER SOURCE 1 INC								
DOCUMENT 1	NUMBER: P04000156637		· · · · · · · · · · · · · · · · · · ·					
The enclosed A	rticles of Amendment and fee are	submitted for filing.						
Please return all	correspondence concerning this	matter to the following:						
ال	OANN LEONE							
	(Name of Contact Person)							
Р	OWER SOURCE 1 INC							
	(Firm/ Company)							
10	10445 GREEN LINKS DRIVE							
,	(Address)							
Τ.	AMPA FL 33626	· ·						
_	(City/ State	e/ and Zip Code)						
For further info	rmation concerning this matter, pl	lease call:						
JOANN LEONE		at (_813)_926-0933						
(N	fame of Contact Person)	(Area Code & Daytim	e Telephone Number)					
Enclosed is a ch	neck for the following amount:							
☑ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)					
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations 409 E. Gaines Street						

Tallahassee, FL 32314

Tallahassee, FL 32399

Articles of Amendment to Articles of Incorporation of

POWER SOURCE 1,INC	a
(Name of corporation as currently filed with the Florida Dept. of State)	
P04000156637	
(Document number of corporation (if known)	₹ III
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:	ي ⊇
NEW CORPORATE NAME (if changing):	
	-
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A."	
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s	s)
and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)	
ARTICLE II, The principal place of business address: 9815 Cedar Street Tampa FL 33635	
ARTICEL III, The mailing address of the corporation: 9815 Cedar Street Tampa FL 33635	
ARTICLE V, The name and Florida street address of the registered agent is:	· :
Joann Leone, 9815 Cedar Street Tampa FL 33635	, , <u> </u>
ARTICLE VII, The initial officer and director of the corporation is:	
Joann Leone, 9815 Cedar Street Tampa FL 33635	
	, · · · -
(Attach additional pages if necessary)	
If an amendment provides for exchange, reclassification, or cancellation of issued shares, provision for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate	
N/A	
	74

(continued)

The date of each amendment(s) adoption: MAY	18, 2005	· · · · · · · · · · · · · · · · · · ·	* * 7 * 7 * -
Effective date if applicable:				
	(no more than 90 days	after amendment fil	e date)	
Adoption of Amendment(s)	(CHECK O	NE)		
☐ The amendment(s) we the amendment(s) by				votes cast for
☐ The amendment(s) very following statement separately on the an	must be separately			
"The number of	votes cast for the a	mendment(s) was	s/were sufficient fo	r approval by
		(voting group)	·	- - "
The amendment(s) vand shareholder acti			rectors without sha	reholder action
☐ The amendment(s) v shareholder action v		by the incorporato	rs without sharcho	lder action and
Signed this 18TH day of 1	MAY	2005		
select	ifector, president or o	- if in the hands of a	tors or officers have no receiver, trustee, or other	ot been her court
JOAI	NN LEONE		 -	
	(Typed or p	rinted name of perso	n signing)	
DIRE	CTOR			
	(Title of person signir	ng)	

FILING FEE: \$35

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF

POWER SOURCE 1, INC.

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

Αt

TAMPA FL 33635

Has named JOANN LEONE, located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with provisions of Florida Law in keeping open said office.

Registered Agent Signature, JOANN LEONE