P0000102536

(Re	questor's Name)	
(Ad	dress)	
	,	
(Address)		
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(D.,	siness Entity Nar	
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
•	-	
Special Instructions to I	Filing Officer:	
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Office Use Only



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O9 MAR 30 AN 10: 28
SECRETARY OF STATE
TALLAHASSEE FLORIDA

delli

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORE	PORATION:	B POWER	INC.
DOCUMENT NU	мвек: <u>Р</u> О6О	06/02536	
The enclosed Artic	eles of Amendment and fee a	are submitted for filing.	
Please return all co	prespondence concerning th	is matter to the following:	
	CHRISTIAN (Name	BATISTE of Contact Person)	
	CMB PO	WER INC.	
	848 HEATHER	GLEN CIR. (Address)	
	LAKE MARY / (City/S	FC 32746 state and Zip Code)	
For further informa	ation concerning this matter,	please call:	
(Name	RATISTE e of Contact Person)	at (<u>407</u>) <u>592</u> (Area Code & Dayti	2-2464 me Telephone Number)
Enclosed is a chec	k for the following amount n	nade payable to the Florida D	Department of State:
\$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)
P.O. Box 6	nt Section Corporations	Street Address Amendment Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	



March 20, 2009

CHRISTIAN BATISTE 848 HEATHER GLEN CIR LAKE MARY, FL 32746

SUBJECT: CMB POWER INC. Ref. Number: P06000102536

We have received your document for CMB POWER INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The last page of your amendment is missing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6927.

Letter Number: 709A00009433

Tracy L Lemieux Regulatory Specialist II

Articles of Amendment to Articles of Incorporation of

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CMB POU	UER IN	C.	EG 🛎 .
(Name of Corporation as curr	rently filed wit	h the Florida Dept. o	of State)
<u> 706000 102</u>	2536		1555
		ation (if known)	mg 3
Pursuant to the provisions of section 607.100	NG Florida Str	tutos this <i>Florida D</i>	rolit Cornoration address th
ollowing amendment(s) to its Articles of Incomparison		itutes, uns <i>Pioriaa P</i>	roju Corporation auspis in
. If amending name, enter the new name of	of the corporat	ion:	·
The new name must be distinguishable of the incorporated" or the abbreviation "Corp.," ("Co". A professional corporation names association," or the abbreviation "P.A."	" "Inc.," or (Co.," or the designati	ion "Corp," "Inc," or
3. Enter new principal office address, if app Principal office address <u>MUST BE A STREI</u>)	
C. Enter new mailing address, if applicable			
(Mailing address <u>MAY BE A POST OFF)</u>	<u>ICE BOX</u>)		
D. If amending the registered agent and/or new registered agent and/or the new reg			, enter the name of the
Name of New Registered Agent:			
New Registered Office Address:	(Fl	orida street address)	
			. Florida
		(City)	(Zip Code)
lew Registered Agent's Signature, if changi hereby accept the appointment as registere			accept the obligations of th
position.	Ø - w		
	Signature of No	w Registered Agent, i	f changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

<u>Title</u>	Name	Address	Type of Action
<u>v P</u>	DONALD LAU	1831 CUROLLA CT. DECTONA PL 321738	Add Remove
			Add Remove
			Add Remove
	ing or adding additional Articles, ente ditional sheets, if necessary). (Be spec		
F. If an am			
	endment provides for an exchange, re ns for implementing the amendment it		
(if no	t applicable, indicate N/A)		
			· · · · · · · · · · · · · · · · · · ·
			·

Th	the date of each amendment(s) adoption: 3/15/09	
	ffactive data if applicable	
	(no more than 90 days after amendment file date)	
Ad	doption of Amendment(s) (CHECK ONE)	
	The amendment(s) was/were adopted by the shareholders. The number of votes cast for the ame by the shareholders was/were sufficient for approval.	ndment(s)
	The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	
	"The number of votes cast for the amendment(s) was/were sufficient for approval	
	by"	
	by" (voting group)	
	The amendment(s) was/were adopted by the board of directors without shareholder action and shaction was not required.	ıareholder
,	The amendment(s) was/were adopted by the incorporators without shareholder action and sharehaction was not required.	older
	Dated 3/25/09	
	Signature & B	
	(By a director, president or other officer – if directors or officers have no selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	PRESIDENT (Title of person signing)	