

PO7000108669

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

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(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Amend.*

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Szoke Power Systems, Inc.

DOCUMENT NUMBER: P07000108669

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Frederick F. Szoke

Name of Contact Person

Szoke Power Systems, Inc.

Firm/ Company

2153 Blue Heron Cove Drive

Address

Fleming Island, FL 32003

City/ State and Zip Code

szokepower@hotmail.com

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

For further information concerning this matter, please call:

Frederick F. Szoke

Name of Contact Person

at ( 904 ) 487-9515

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |  |  |   |   |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input checked="" type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |
|--|--|---|---|

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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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Articles of Amendment  
to  
Articles of Incorporation  
of

Szoke Power Systems, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P07000108669

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

(Florida street address)

New Registered Office Address: \_\_\_\_\_, Florida

(City)

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

\_\_\_\_\_  
Signature of New Registered Agent, if changing

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**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)*

*Please note the officer/director title by the first letter of the office title:*

*P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.*

*Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.*

**Example:**

X Change                      PT      John Doe

X Remove                    V       Mike Jones

X Add                         SV      Sally Smith

Type of Action  
(Check One)

Title

Name

Address

- |   |               |                       |                                   |
|---|---------------|-----------------------|-----------------------------------|
| 1) <input type="checkbox"/> Change      | <u>Asst V</u> | <u>Logan M. Szoke</u> | <u>2153 Blue Heron Cove Drive</u> |
| <input checked="" type="checkbox"/> Add |               |                       | <u>Fleming Island, FL 32003</u>   |
| <input type="checkbox"/> Remove         |               |                       | <u></u>                           |
| 2) <input type="checkbox"/> Change      | <u></u>       | <u></u>               | <u></u>                           |
| <input type="checkbox"/> Add            |               |                       | <u></u>                           |
| <input type="checkbox"/> Remove         |               |                       | <u></u>                           |
| 3) <input type="checkbox"/> Change      | <u></u>       | <u></u>               | <u></u>                           |
| <input type="checkbox"/> Add            |               |                       | <u></u>                           |
| <input type="checkbox"/> Remove         |               |                       | <u></u>                           |
| 4) <input type="checkbox"/> Change      | <u></u>       | <u></u>               | <u></u>                           |
| <input type="checkbox"/> Add            |               |                       | <u></u>                           |
| <input type="checkbox"/> Remove         |               |                       | <u></u>                           |
| 5) <input type="checkbox"/> Change      | <u></u>       | <u></u>               | <u></u>                           |
| <input type="checkbox"/> Add            |               |                       | <u></u>                           |
| <input type="checkbox"/> Remove         |               |                       | <u></u>                           |
| 6) <input type="checkbox"/> Change      | <u></u>       | <u></u>               | <u></u>                           |
| <input type="checkbox"/> Add            |               |                       | <u></u>                           |
| <input type="checkbox"/> Remove         |               |                       | <u></u>                           |

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[illegible]

Frederick F. Szoke - 51%

Timothy S. Szoke- 10%

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The date of each amendment(s) adoption: 12/1/2013, if other than the date this document was signed.

Effective date if applicable: 12/1/2013  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

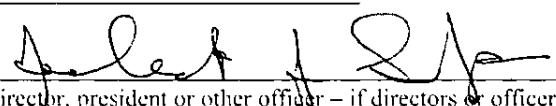
by \_\_\_\_\_."  
(voting group)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 12/1/2013

Signature

  
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Frederick F. Szoke

(Typed or printed name of person signing)

President

(Title of person signing)

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TALLAHASSEE, FL 32301

CERTIFICATE

No. 05

for 100 Shares

Received Certificate No. —

for — Shares

Issued to — M. S. Zok

on — , —

Dated

NO. OF ORIGINAL  
CERTIFICATE

NO. OF ORIGINAL  
SHARES

NO. OF SHARES  
TRANSFERRED

Dated 12-1, 2013

1 100

05

INCORPORATED UNDER THE LAWS OF  
THE STATE OF FLORIDA

SHARES

SZOKE POWER SYSTEMS, INC.

Authorized To Issue 10,000 Shares Common Stock At \$ 1.00 Par Value

This Certifies That

is hereby issued — fully paid

and now assessable Shares of the above named Corporation  
transferable only on the books of the Corporation by the holder hereof in person or  
by duly authorized attorney upon surrender of the Certificate properly endorsed.

In Witness Whereof, the said Corporation has caused this Certificate to be  
signed by its duly authorized officers and its Corporate Seal to be hereunto affixed

this — day of — A.D.

SECRETARY

PRESIDENT

AS