## 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.

(((H16000159910 3)))



H160001599103ABC%

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)617-6380

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Phone

Account Number : 110432003053

JUL 0'6 2016

: (561)694-8107

R. WHITE

Fax Number

: (561)694-1639

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

Email Address:

## COR AMND/RESTATE/CORRECT OR O/D RESIGN HYPOWER, INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

Electronic Filing Menu

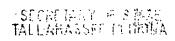
Corporate Filing Menu

Help

PAGE 02/05

16 JUL -5 AM 8: 32

Articles of Amendment to Articles of Incorporation



HYPOWER, INC.				
(Name of Corporation	n as currently filed	with the Florida Dep	t. of State)	
P07000134124				
(Docum	ent Number of Corpo	oration (if known)		
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	Statutes, this Florida	a Profit Corporation a	dopts the following	g amendment(s)
A. If amending name, enter the new name of the co	rporation:			
				The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp., word "chartered," "professional association." or the	" "Inc, " or "Co"	ompany," or "incorp A professional corpor	orated" or the ab cation name must c	bbreviation
B. <u>Enter new principal office address, if applicable</u> (Principal office address <u>MUST BE A STREET ADD</u>			<del></del>	
C. Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BO.	<u>x</u> )			<del></del>
D. If amending the registered agent and/or register new registered agent and/or the new registered	ed office address in office address:	Florida, enter the nu	me of the	
Name of New Registered Agent		· · · · · · · · · · · · · · · · · · ·		
	(Florida street add	tress)		
New Registered Office Address:			_, Florida	
	(City)	······································	(Zip C	(nde)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	istered A <u>pont:</u> I am familiar with an	ed accept the obligation	ns of the position.	
Sign	ature of New Register	red Agens, if 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)

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 = Chairmon 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: XChange	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	CFOS	STEPHEN K CASSETTA	5913 NW 31ST AVE
Add X Remove			FORT LAUDERDALE, FL 33309
2) Change		<del></del>	
Rcmove			
3 ) Change			
Remove			
4) Change Add			
Remove			
5) Change Add			
Removo			
6) Change			
Remove			

	lding additional Argineets, if necessary).	(Be specific)	<del></del> .		
					<u> </u>
<del>-</del>					
<u></u>			·····		
_					
	<u></u>	<del>-</del>	<del>_</del>	_ <del></del> _	
			· · · · · · · · · · · · · · · · · · ·		
<del></del>				,	- <u></u>
		<u></u>		····	
<u></u>					
provisions for im	provides for an exc uplementing the arg able, indicate N/A)	hange, reclassifica endment if not con	tion, or cancellation tained in the amen	of issued shares, dment itself:	
		<b>-</b>			
			·		

	doption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after omendment file date)	
Note: If the date inserted in this I document's effective date on the D	block does not meet the applicable statutory filing requirements, thi epartment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	<b>S</b>
☐ The amendment(s) was/were ad by the shareholders was/were so	opted by the shareholders. The number of votes east for the amendm afficient for approval.	ent(y)
☐ The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The following stare each voting group entitled to vote separately on the amendment(s):	lement
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareh	older
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholde	r
July 1st, 2 Dated	016	
Signature		
(By a c	lisector, president or other officer – if directors or officers have not be ad, by an incorporator – if in the hands of a receiver, trustee, or other sted fiduciary by that fiduciary)	een court
	Jessica Morales	
	(Typed or printed name of person signing)	
	Attorney in Fact	
	(Title of person signing)	