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(Requestor's Name)	
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PICK-UP WAIT	MAIL
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Certified Copies Certificates of S	Status
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Special Instructions to Filing Officer:	
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	HINE TURBINE INCORPORATED
DOCUMENT NUMBER: PO900	00/2/09
The enclosed Articles of Amendment and fee are s	ubmitted for filing.
Please return all correspondence concerning this m	atter to the following:
(Name of C	ONTAL DONAGE INCORPORATED Company)
5555 sw 19	2 TEMPLACE (dress)
SW RANCHES (City/State	FL 33332 and Zip Code)
For further information concerning this matter, ple	ase call:
(Name of Contact Person)	at (786) 402 - 2843 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made	e payable to the Florida Department of State:
\$35 Filing Fee \$\ \tag{Certificate of Status}	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy 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

## **Articles of Amendment**

Articles of Incorporation

	211 deles of theor poracio	" UYBAR 10 Du
	of	" 09 MAR 12 PM 1:41
JUNSHINE	TURBINE -	[NCORPORATED
(Name of Corporation a	is currently filed with the F	lorida Dept. of State)
Po9	0000121	<u> </u>
(Docume	ent Number of Corporation (i	f 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:

NNSHINE AS new name must be distinguishable of corporated" or the abbreviation "Corp.," o". A professional corporation nam ociation," or the abbreviation "P.A."	and contain the " "Inc.," or Co.	word "córpora or the designa,"	tion," "company," or tion "Corp," "Inc," or
Enter new principal office address, if ap- incipal office address <u>MUST BE A STREI</u>		MAZ_	E AS CURREA
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		74 3M42	CUPPENT
			la, enter the name of the
			a, enter the name of the
If amending the registered agent and/or new registered agent and/or the new registered Agent:  Name of New Registered Agent:  New Registered Office Address:	istered office add		л 

## 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>	<u>Name</u>	Address	Type of Action
		<del>/</del>	——— □ Add
			Remove
***************************************			Add Remove
			<del></del>
E. If amer (attach o	nding or adding additional Articles, eadditional sheets, if necessary). (Be s	enter change(s) here: Specific)	
			<del> </del>
***************************************			/
F. If an a	mendment provides for an exchange	, reclassification, or cancellation	of issued shares,
	ions for implementing the amendment in t	nt it not contained in the amend	ment itseit:
(3)	·····,		
			<u> </u>
		<u>/</u> /	
	<u> </u>		
	**************************************	Page 2 of 3	

The date of each amendment(s) adoption:	3/10/09
Effective date if applicable: 3/10/6	9
	days after amendment file date)
Adoption of Amendment(s) (CHE	CK ONE)
The amendment(s) was/were adopted by the slow by the shareholders was/were sufficient for ap	nareholders. The number of votes cast for the amendment(s) proval.
	shareholders through voting groups. The following statemen roup entitled to vote separately on the amendment(s):
"The number of votes cast for the amendr	nent(s) was/were sufficient for approval
by(voting group)	
action was not required.	oard of directors without shareholder action and shareholder
action was not required.	ncorporators without shareholder action and shareholder
Dated 3/10/08	
Signature	
	nt or other officer – if directors or officers have not been orator – if in the hands of a receiver, trustee, or other court that fiduciary)
	ANA L ad or printed name of person signing)
(1yk	
<i>UF4</i>	(Title of person signing)