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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H15000050339 3)))



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To:

Division of Corporations

Fax Number

From:

Account Name : TRIAD PROFESSIONAL SERVICES LLC COA

Account Number : 120080000085 : (770)777-2091 Phone Fax Number : (770)220-1943

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

REGISTERED AGENT CHANGE 2G CENERGY POWER SYSTEMS TECHNOLOGIES INC.

Certificate of Status	0	
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FEB 2 7 2015 T. CARTER

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: 2G Cenergy Power Systems Technologies Inc.	
P0900076033	
DOCUMENT NUMBER: PUBUUU / 6033	
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
ELISSA HART	
Name of Contact Person	
SMITH, GAMBRELL & RUSSELL, LLP	
Firm/Company	
1230 PEACHTREE ST., SUITE 3100	
Address	
ATLANTA, GA 30309	
City/State and Zip Code	
EHART@SGRLAW.COM	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
ELISSA HART	
Name of Contact Person at () Area Code & Daytime Telephone Num	ber
Enclosed is a \$35.00 check made payable to the Department of State.	
Mailing Address: Amendment Section Street Address: Amendment Section	
Division of Corporations Division of Corporations	
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle	

Tallahassee, FL 32301

(((H15000503393))) STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida S statement of change is submitted for a corporation organized under the laws of the State of F	•	
in order to change its registered office or registered agent, or both, in the State of F	 	
1. The name of the corporation: 2G CENERGY POWER SYSTEMS TECHNO	LOGIES INC.	
2. The principal office address: 205 COMMERCIAL DRIVE ST. AUGUSTINE, FL 32092		
3. The mailing address (if different):		
4. Date of incorporation/qualification: 9/11/2009 Document number: P09000	0076033	
5. The name and street address of the current registered agent and registered office on file wit Florida Department of State: (If resigned, enter resigned)	th the	
MICHAEL J. TURWITT		
569 SARATOGA STREET		
ORANGE PARK, FL 32073	TALL 15 F	
6. The name and street address of the new registered agent (if changed) and /or registered offi (if changed):	LAHASS FEB 26	
SMITH, GAMBRELL & RUSSELL, LLP		
50 NORTH LAURA ST., SUITE 2600		
P.O. Box NOT acceptable JACKSONVILLE, FL 32202	ATE RIDA 25	
The street address of its registered office and the street address of the business office of its as changed will be identical.	registered agent.	
Such change was authorized by resolution duly adopted by its board of directors or by an olauthorized by the board, of the corporation has been notified in writing of the change.	fficer so	
	Hans-Michael Kraus - Secretary	
Signature of an officer or director. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and comp performance of my duties, and I am familiar with and accept the obligation of my position agent. Or, if this document is being filed merely to reflect a change in the registered office hereby confirm that the dorpostation has been notified in writing of this change.		
Signuture of Registered Agent Date		
If signing on behalf of an entity:		
HANS-MICHAEL KRAUS Typed or Printed Name		
* * FILING FEE: \$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. Box 6327, Tallahassee, FL 32314
CR2E045 (03/12)

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