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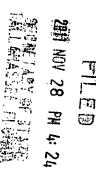
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11-30-11

COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:	E-POD	Energy,	Inc.	
Enclosed are an ori	(PROPOSED CORPOR	Ticles of incorporation at		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL C	\$87.50 Filing Fee, Certified Copy & Certificate of Status COPY REQUIRED	
FROM: Mr. Thomas E. Audit, PE				
	18100 NW	149 Place	2	
	Alachua, F	L 32615 v, State & Zip		
_	352 214-7 Daytime	300 Telephone number		
tomaudite wind stream. net E-mail address: (to be used for future annual report notification)				

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPO	DRATION E
In compliance with Chapter 607 and/or C	hapter 621, F.S. (Profit)
A TOMEST TO BE A SET OF	1 No 1
The state of the s	
The name of the corporation shall be: E-POD Energy	19,770
ARTICLE II PRINCIPAL OFFICE	1962 194
Principal street address	Mailing address, if different is:
18100 NW 149 Place	POBOX 562 5
Alachua, FL 32615	Alachua, FL 32615 1
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
Research and development of sol	ar onergy devices use of
resecrated net active to pment to the	ar enorgy of core to
Power on demand, and altern Energy converted from many different Sheft work output.	late power storace,
Energy Converted From many differen	it natural Forms to electrical
Chief work autout	
ARTICLE IV SHARES	
The number of shares of stock is: 1,000,000	
,,000,000	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	_
Name and Title: Tom F Aud + TESIDEN	he and Title:
Address: 18100 NW 149 Place Ad	dress:
Alachua, FL 32615	
Name and Title: Mark Cough lin - Director Nam	me and Title:
Address: 1330 NB 107 Terrace Add	me and Title:
Gainesville, FL 32606	III Ç35.
- The state of the	
Name and Title: Michael Buldwin - Director Nam	me and Title:
Address: 525 NW 80 BLVD Add	
Gainesville, FL 32607	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of the re	existened agent is:
Name: Tom E. Audit	gistered agent is.
Address: 18100 NW 149 Place	
Alachua, FL 37/015	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Name: Mark Coughlin	
Address: 1330 NW 107 Tenace	
Gaines will, FL 37406	
Uning heen named as perintered agant to assent service of process for the	the above stated comparation at the place designed of in
Having been named as registered agent to accept service of process for this certificate, I am familiar with and accept the appointment as registered	
inis cerujicaie, i um junaiau van anu accept ine appoiniment as registeret	
Town E Class	11/25/2011
Mories & Celas	11/25/2011
Required Signature/Registered Agent	' Date
I submit this document and affirm that the facts stated herein are true.	I am aware that the false information submitted in a
document to the Department of State constitutes a third degree felony as m	
Mest Could— Required Signature/Incorporator	
Mand Coulding	11/25/2011 Date
Required Signature/Incorporator	Dite
	, 57