PHDDO9549

| | ` | |
|---|--------------------|-------------|
| (Re | equestor's Name) | |
| | | |
| // | ldress) | |
| (AC | iaress) | |
| | | |
| (Ac | Idress) | |
| V | , | |
| | | |
| (Ci | ty/State/Zip/Phone | ⇒ #) |
| | | |
| DICK UP | □ \A/AIT | MAIL |
| L PICK-UP | MAIT | LI WAIL |
| | | |
| | | |
| (Bu | isiness Entity Nan | ne) |
| | | |
| | | |
| (Document Number) | | |
| | | |
| Certified Copies | Certificates | of Status |
| Certified Copies Certificates of Status | | |
| | | |
| 6 111 1 11 1 | | |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | i |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Office Use Only



300285890803

06/09/16--01009--016 **35.00



R. WHITE

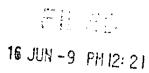
COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATI | ON: International Batto | ery Supply, Inc. | | |
|--|---|---|---|--|
| DOCUMENT NUMBER: | P14000099549 | | | |
| The enclosed Articles of Ar | nendment and fee are su | bmitted for filing. | | |
| Please return all correspond | ence concerning this ma | tter to the following: | | |
| | | Jeff Mosher | | |
| | | Name of Contact | Person | |
| | Inte | ernational Battery Suj | pply, Inc. | |
| | 302 | Firm/ Compa | ny | |
| | | 4415 Northrop Ter | тасе | |
| Address | | | | |
| | Tampa, FL 33618 | | | |
| | | City/ State and Zip | p Code | |
| | jeff | mosher@tampabay.rr | :.com | |
| | E-mail address: (to be us | | | |
| For further information cond | cerning this matter, pleas | se call: | | |
| Jeff M | losher | at (| | |
| Name of Cor | ntact Person | Ar | ea Code & Daytime Telephone Number | |
| Enclosed is a check for the | following amount made | payable to the Florida | Department of State: | |
| ■ \$35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fe Certified Copy (Additional copy enclosed) | Certificate of Status | |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | A D C | treet Address Amendment Section Division of Corporations Clifton Building 661 Executive Center Circle | |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



to

| | International Batte | ry Supply, Inc. | | |
|--|-------------------------------|------------------------|---|--|
| (<u>Name</u> | of Corporation as current | y filed with the Flor | ida Dept. of State) | |
| | P1400009 | 99549 | | |
| | (Document Number o | f Corporation (if know | vn) | |
| Pursuant to the provisions of section 607 its Articles of Incorporation: | .1006, Florida Statutes, this | Florida Profit Corpo | ration adopts the following amendment(s | |
| A. If amending name, enter the new n | ame of the corporation: | | | |
| | | | The new | |
| name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associo | nation "Corp," "Inc," or " | Co". A professional | | |
| B. Enter new principal office address, if applicable: | | 4415 Northrop Te | 4415 Northrop Terrace | |
| (Principal office address <u>MUST BE A S</u> | | Tampa, FL 33618 | | |
| | | - | | |
| C. Enter new mailing address, if appl (Mailing address MAY BE A POST | | PO Box 260836 | | |
| (Multing duaress MAT BE A POST OFFICE BOX) | | Tampa, FL 33685-0836 | | |
| | | | | |
| D. If amending the registered agent an new registered agent and/or the ne | | | the name of the | |
| Name of New Registered Agent | Jeff Mosher | _ | | |
| Name of New Negistered Agent | 4415 Northrop Terrace | | | |
| | (Florida str | eet address) | | |
| New Registered Office Address: | Tampa | | Florida 33618 | |
| | | (City) | (Zip Code) | |
| New Registered Office Address: | Tampa | | , Florida | |
| New Registered Agent's Signature, if c | hanging Registered Agent | <u>.</u> | The second second | |
| I hereby accept the appointment as regist | vered agent. I am familiar v | viin and accept the ob | ugations of the position. | |
| | AAA ? | Moston | | |
| | Signarare of New R | egistered Agent, if ch | anging | |

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.

| X Change | <u>PT</u> | John Doe | |
|-------------------------------|--------------|---------------|-----------------------|
| X Remove | <u>v</u> | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) X Change | V | Ralph Roller | 4415 Northrop Terrace |
| Add | | | Tampa, FL 33618 |
| Remove | | | |
| 2) Change | CEO | Jeff Mosher | 4415 Northrop Terrace |
| X Add | | | Tampa, FL 33618 |
| Remove | | | |
| 3)Change | P | Randy Leapley | 4415 Northrop Terrace |
| X Add | | | Tampa, FL 33618 |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | _ | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| • | | _ | |
| Add | | | |
| Remove | | | |

| If amending or adding additional Arti Attach additional sheets, if necessary). | (Be specific) |
|---|---|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | 2 |
| | |
| | |
| | |
| | |
| f an amendment provides for an exch | nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself: |
| (if not applicable, indicate N/A) | |
| | |
| | |
| | |
| | |
| | |
| | |

| The date of each amendment(s) addate this document was signed. | option: | , if other than the |
|---|--|-------------------------------|
| • | | |
| Effective date if applicable: | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this blocument's effective date on the Dep | ock does not meet the applicable statutory filing requirements, this artment of State's records. | date will not be listed as th |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amendment(s) was/were adop by the shareholders was/were suf | sted by the shareholders. The number of votes cast for the amendmer ficient for approval. | nt(s) |
| | oved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s): | ment |
| "The number of votes cast for | or the amendment(s) was/were sufficient for approval | |
| by | , sa | |
| | (voting group) | |
| ☐ The amendment(s) was/were adoptaction was not required. | sted by the board of directors without shareholder action and shareho | lder |
| ☐ The amendment(s) was/were adoptaction was not required. | eted by the incorporators without shareholder action and shareholder | |
| 6/6/16 Dated | | |
| Signature | Jell Moster | |
| (By a dir selected, | ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other conditional diduction of the fiduction of the fi | n purt |
| | Jeff Mosher | |
| _ | (Typed or printed name of person signing) | |
| | CEO | |
| - | (Title of person signing) | |