## 95000047268

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

| SUBJECT:                        | GOOD POWER CORP   |   |
|---------------------------------|---|---|
|                                 | (proposed corporate name)   |   |
| Enclosed please above corporati | e find an original and one (1) copy of the article on and check in the amount of \$ | es of incorporation for the                                 |
| FROM:                           | GOOD POWER CORP  Name    83 5 5 5 7 7 7 6   | 95 JUNI 14 MH 9: 14 SECRETARY OF STATE TALLAHASSEE. FLORIDA |
|                                 | Telephone Number  | 800001513008<br>-06/14/9501056008<br>*****77 00 *****77 00  |

Note: Additional copy of articles is needed only when certified copy is requested.

#### **ARTICLES OF INCORPORATION**

<u>OF</u>

GOOD POWER CORP

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

#### ARTICLE I NAME

The name of the corporation shall be:

GOOD POWER CORP

# 95 JUN 1 4 AM 9: 15 SECRETARY OF STATE SECRETARY OF STATE

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1965 SW 70 WAY

POMPANO BEACH, FL 33068

#### ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

500 SHARES AT \$1.00 PAR VALUE

#### ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

ISIDRO LUNA 1965 POWER 1965 SW 70 WAY POMPANO BEACH FL 33068

#### ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

ISIDRO LUNA 1965 SW 70 WAY POMPANO BEACH, FL 33068

95 JUH 14 AM 9: 15
SECRETARY OF STATE
SECRETARY OF STATE

| The undersigned | has(have) exe | cuted these An | ticles of Incorporation this     |
|-----------------|---------------|----------------|----------------------------------|
| 6               | day of _      | JUNE           | , 19 <u>95</u> .                 |
|                 |               | x Sint         | wal President<br>Signature/Title |
|                 |               | 77.23          | Signature/Title                  |
|                 |               |                | Signature/Title                  |
|                 | •             | <del></del>    | Signature/Title                  |

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

| ı. T | he name (   | of the cor  | poratio | on is:           | GOOD PO             | WER | CORP |   |
|------|-------------|-------------|---------|------------------|---------------------|-----|------|---|
|      | he name a   |             | ess of  | the registered a | gent and office is: |     |      |   |
| _    |             | <del></del> |         | (Na              | me)                 |     |      | _ |
|      | 1965 SW     | 70 WAY      |         |                  |                     |     |      |   |
| _    | <del></del> |             |         | (P.O. Box NO     | [ acceptable)       |     |      |   |
| 1    | POMPANO     | ВЕАСН       | FL      | 33068            |                     |     |      |   |
| _    |             |             |         | (City/St         | 140 (Zin)           |     |      |   |

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

**SIGNATURE** 

DATE

REGISTERED AGENT FILING FEE: \$35.00

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