F16000000371

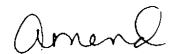
(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
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(Document Number)				
Certified Copies Certificates of Status				
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A. RAMSEY NOV 2 2 2021

COVER LETTER

TO: Amendme	ent Section Division of Corporati	ons	4
SUBJECT: Power	Chord, Inc.		•
50000CT	Name	e of Corporation	
DOCUMENT NU	JMBER: F16000000371		
The enclosed Ame	endment and fee are submitted for	filing.	
Please return all co	orrespondence concerning this ma	itter to the following:	
Michelle Tipton			
	Name of Contact Person		
PowerChord, Inc.			
	Firm/Company		
627 33rd Ave. N.			
	Address		
St. Petersburg, FL	33704		
	City/State and Zip Code		
MTipton@PowerC			
E-mail addre	ss: (to be used for future annual r	eport notification)	
For further informa	ation concerning this matter, plea	se call:	
Michelle Tipton		at (
Name	e of Contact Person	Area Code & Daytime	Telephone Number
Enclosed is a check	k for the following amount:		
\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy	▲ \$52.50 Filing Fee Certificate of Status Certified Copy

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Ft. 32314 Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION 1 (1-3 MUST BE COMPLETED)

(1-3 MUST	BE COMPLETED)	ment of State)
F16000000371		8 6 1
(Document number	er of corporation (if known)	
PowerChord, Inc.		
(Name of corporation as it appears	on the records of the Depart	ment of State)
2. Delaware	3. 1/22/2016	
(Incorporated under laws of)	(Date author	ized to do business in Florida)
	ECTION II THE APPLICABLE CHA	· NGFS)
4. If the amendment changes the name of the corporation, when wa	_	the laws of its jurisdiction of
incorporation?		
Name of corporation after the amendment, adding suffix "corporation on the corporation of the corporation)	oration," "company," or "inc	orporated," or appropriate abbreviation, if
(If new name is unavailable in Florida, enter alternate corporate	name adopted for the purpos	e of transacting business in Florida)
6. If the amendment changes the period of duration, indicate r	new period of duration.	
(Ne	ew duration)	
7. If the amendment changes the jurisdiction of incorporation.	, indicate new jurisdiction.	
(New	v jurisdiction)	
3. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office address		name of the
Name of New Registered Agent		
(Florida s	street address)	
New Registered Office Address:	···	_, Florida
(C	ity)	(Zip Code)
New Registered Agent's Signature, if changing Registered A	Agent:	
I hereby accept the appointment as registered agent. I am fam	iliar with and accept the obli	gations of the position.
Signature of New Registered Agent, if changing	<u></u>	

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change: Title/ Capacity Type of Action Name Address CEO Lanny Tucker 360 Central Ave., Suite 500 □Add St. Petersburg, FL 33701 Vice President Mark Regan 360 Central Ave., Suite 500 □Add St. Petersburg, FL 33701 **E**Remove CEO/Tregsurer William Volmuth 360 Central Ave., Suite 500 \square Add St. Petersburg, FL 33701 Remove Michelle Tipton Assistant 360 Central Ave., Suite 500 ✓Add Treasurer St. Petersburg, FL 33701 Remove □Add Remove 10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated. (Signature of a director, president or other officer - if in the hands of

FILING FEE \$35.00

a receiver or other court appointed fiduciary, by that fiduciary)

Asst. Treasurer

11/01/2021

(Title of person signing)

Michelle Tipton

(Typed or printed name of person signing)