M10265

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: TRADEWINDS PO	OWER CORP.	 			
DOCUMENT NUM	M10265					
The enclosed Articles	of Amendment and fee are su	bmitted for filir	ıg.			
Please return all corre	spondence concerning this ma	tter to the follow	wing:			
	ILENIS PANTALEON					
	Name of Contact Person					
	TRADEWINDS POWER CO	ORP.				
	Firm/ Company					
	5820 NW 84TH AVENUE					
		Add	ress	_		
	MIAMI, FL 33166					
		City/ State a	nd Zip Code			
	ipantaleon@tradewindspower	r.com				
	E-mail address: (to be us	sed for future ar	nual report	notification)		
For further information	on concerning this matter, pleas	se call:				
ILENIS PANTALEC	N	at (305	592-9745 EXT 147		
Name	(_		le & Daytime Telephone Number			
Enclosed is a check fe	or the following amount made	payable to the f	lorida Depa	rtment of State:		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 Fil Certified C (Additional enclosed)	opy copy is	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			Amendo Division The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee I. Monroe Street, Suite 810 ssee, FL 32303		

Articles of Amendment **Articles of Incorporation** of

TRADEWINDS POWER CORP.

(Name o	f Corporation as currentl	y filed with the Florida Dept. of State)	
M10265			
	(Document Number o	f Corporation (if known)	
ursuant to the provisions of section 607. s Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the fo	llowing amendment(s)
. If amending name, enter the new n	ame of the corporation:		
N/A			The new
ame must he distinguishable and contain Inc.," or Co.," or the designation "C chartered," "professional association."	Corp," "Inc," or "Co". 2	company," or "incorporated" or the abbi 1 professional corporation name must	eviation "Corp.," contain the word
Estas now principal office address	if applicable:	N/A	
 Enter new principal office address, Principal office address MUST BE A S 			
	·		
C. Enter new mailing address, if appl		N/A	
(Mailing address MAY BE A POST	<u>OFFICE BOX</u>)		
		<u> </u>	202
			<u> </u>
			· · ·
. If amending the registered agent ar			()
new registered agent and/or the ne		<u>:</u>	
Name of New Registered Agent	N/A		<u>.</u>
			ည
	(Florida str	reet address)	
No. Bering J.O.S. a. A.H.	N/A	. Florida	
New Registered Office Address:		(City)	(Zip Code)
			•
New Registered Agent's Signature, if o	hanging Registered Agent	<u>:</u>	
hereby accept the appointment as regis.	'ered agent. I am familiar	with and accept the obligations of the po	sition.
	Signature of New F	egistered Agent, if changing	
	Signature of trew is	egistered Agent, y changing	

[☐] The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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.

Example:	e, and our	i smiin, sr us un muu.	
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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	CFO	CHARLES WEEKS	5820 NW 84TH AVENUE
Add			MIAMI, FL 33166
X Remove			
2) Change	CFO	CHARLY SMITH	5820 NW 84TH AVENUE
X Add			MIAMI, FL 33166
Remove 3) Change	MNG	ILENIS PANTALEON	5820 NW 84TH AVENUE
X Add			MIAMI, FL 33166
Remove			
4) Change			
Add			
Remove			
5) Change			·
Add			
Remove			
6) Change			
Add			
Remove			

,	adding additional A al sheets, if necessary,). (Be specific)				
I/A						
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provisions for	ent provides for an eximplementing the andicable, indicate N/A)	mendment if not co	cation, or cancella ontained in the an	tion of issued shan nendment itself:	res,	
				. ,		
			,			

The date of eac	ch amendment(s) a	N/A doption:	, if other than the
	ient was signed.		
C. C		/2020	
Effective date	п аррисавіе:	(no more than 90 days after amer	ndment file date)
		block does not meet the applicable statutory filepartment of State's records.	ling requirements, this date will not be listed as the
Adoption of A	mendment(s)	(<u>CHECK ONE</u>)	
The amendal action was n		opted by the incorporators, or board of directors	s without shareholder action and shareholder
		opted by the shareholders. The number of votes afficient for approval.	s cast for the amendment(s)
		proved by the shareholders through voting group each voting group entitled to vote separately o	
"The r	number of votes cast	for the amendment(s) was/were sufficient for a	approval
by			
		(voting group)	
	6/30/2020 Dated		•
	Signature	The Jan	
	selecte	irector, president or other of the jet directors of the directors of the hands of a rece ted fiduciary by that fiduciary)	or officers have not been iver, trustee, or other court
		THOMAS J. TRACY, III	
		(Typed or printed name of person s	igning)
		PRESIDENT	
		(Title of person signing)	