N1600000 9251

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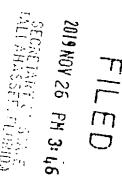
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Amend

JAN 1) & 2029 LALBRITION

COVER LETTER



NAME OF CORPORATION:		HUSSARIAN	S POWER IN	NC -	
OOCUMENT NUMBER:		N16000009	251		
The enclosed Articles of Amendment at	nd fee are submitt	ed for filing.			
lease return all correspondence concer	ning this matter to	the following:			
		WALTER STOCK	ER		
	(N	ame of Contact Per	son)	•··	
		BIZ ACCOUNTA	NTS		
		(Firm/ Company)			
	1070 W	HORIZON RIDGI	E PKWY STE	3111	
A facility of the second		(Address)			
	HE	NDERSON, NV 89	012		
	(Ci	ty/ State and Zip Co	ode)	- · · · · · · · · · · · · · · · · · · ·	
	biza	accountants@yahoc	.com		
E-mail addre	ss: (to be used for	future annual repo	rt notification	1)	
or further information concerning this	matter, please cal	l:			
WALTE	ER STOCKER	91	702	480-4341	
(Name of C	Contact Person)			(Daytime Telephone Number)	
inclosed is a check for the following an	nount made payab	le to the Florida De	partment of S	State:	
	ate of Status (643.75 Filing Fee & Certified Copy Additional copy is enclosed)	Certifi Certifi	O Filing Fee icate of Status ied Copy is issed)	
Mailing Address			et Address		
Amendment Section Division of Corporations		Amendment Section			

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

HUSSARIANS POWER, INC.

(Name of Corporation as currently filed with the Florida Dept. of State) N16000009251 (Document Number of Corporation (if known) ursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following mendment(s) to its Articles of Incorporation: . If amending name, enter the new name of the corporation: ame must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." Company" or "Co." may not be used in the name. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS) . Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) . If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: Florida (City) (Zip Code) ew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. A am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing

f amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and ddress of each Officer and/or Director being added:

Ittach additional sheets, if necessary)

xample:

lease note the officer/director title by the first letter of the office title:

= President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C= Chairman or Clerk; CEO = Chief xecutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office eld. President, Treasurer, Director would be PTD.

'hanges 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 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, like Jones, V as Remove, and Sally Smith, SV as an Add.

<u>CC</u> hange <u>C</u> Remove <u>C</u> Add	V Mike SV Sally	<u>Doe</u> Jones <u>Smith</u>			
gpe of Action Theck One)	<u>Title</u> N/A	<u>Name</u>		<u>Addres</u> s	
Change			<u>.</u>		
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amending Article III
Adding additional text to Article III
IUSSARIANS POWER INC is organized exclusively for charitable, religious, educational and scientific purposes,
neluding, for such purposes, the making of distributions to organizations that qualify as exempt organizations described
nder section 501 (c) (3) of the Internal Revenue Code, or corresponding section of any future federal tax code.
Not withstanding any other provision of these articles, HUSSARIANS POWER INC shall not carry on any activities
ot permitted to be carried on by an organization exempt from Federal income tax under section 501 (c) (3) of the
nternal Revenue Code or the corresponding provision of any future United States Internal Revenue law.
Jpon the dissolution of HUSSARIANS POWER INC, assets shall be distributed for one or more exempt purposes
vithin the meaning of Section 501 (c) (3) of the Internal Revenue Code, or corresponding section of any future
ederal tax code, or shall be distributed to any federal government, or to a state or local government, for a public purpose.
Any such assets not disposed of by a court of competent jurisdiction in the county in which the principal office of the
organization is then located, exclusively for such purposes or to such organization or organizations, as said court shall
letermine, which are organized and operated exclusively for such purposes.

. <u>If amending or adding additional Articles, enter change(s) here:</u> (attach additional sheets, if necessary). (Be specific)

he date of each amendate this document was s		, if other than the
ffective date <u>if applies</u>	(no more than 90 days after amendment file date)	
	d in this block does not meet the applicable statutory filing requirements, this date will not e on the Department of State's records.	be listed as the
doption of Amendme	nt(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were sufficient	was/were adopted by the members and the number of votes cast for the amendment(s) for approval.	
There are no memb adopted by the boa	ers or members entitled to vote on the amendment(s). The amendment(s) was/were rd of directors.	
Dated	11/12/2019	
Signature	In Has	
	By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	-
	Joanna Hanzcaruk	ì
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	