## P01000111936

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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Gentel Power Reso	ources, Inc.	
	IBER: P01000111936		
	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	Craig M. Grason		
	-	Name of Contact Perso	n
	Gentel Power Resources, Inc.	•	
	<del></del>	Firm/ Company	
	P.O. Box 701402	, Jess. p	
		Address	<del>-</del>
	Saint Cloud, FL 34770		
		City/ State and Zip Cod	e e
	craig@gentelpower.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, plea	se call:	
Craig Grason		at (	
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:
S35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
At Di P.G	ailing Address nendment Section vision of Corporations D. Box 6327 Hahassee, FL 32314	Amend Division The C	Address diment Section on of Corporations Centre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

## **Articles of Amendment** Articles of Incorporation of

	Articles of incorporation	
	of	FHFD
Gentel Power Resources, Inc.		
(Name of C	orporation as currently filed with the	Florida Dept. of State)
P01000111936		1 0 14 7 55 c
	(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607,100 its Articles of Incorporation:	6, Florida Statutes, this <i>Florida Profit Co</i>	orporation adopts the following amendo

A. If amending name, enter the new name of the corporation:	./:4		
name must be distinguishable and contain the word "corporation,"	N/A The ner		
iame must be distinguishable and contain the word—corporation. 'Inc.,'' or Co.,'' or the designation "Corp,'' "Inc,'' or "Co". 'chartered,'' "professional association,'' or the abbreviation "P.A.	A professional corporation name must contain the wor		
3. Enter new principal office address, if applicable:	1408 Hamlin Ave. Unit-A		
Principal office address MUST BE A STREET ADDRESS )	Saint Cloud, FL 34771		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO Box 701402		
	Saint Cloud, FL 34770		
	Sam Cloud. 125 777		
D. If amending the registered agent and/or registered office ade new registered agent and/or the new registered office addres	lress in Florida, enter the name of the		
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address Name of New Registered Agent	lress in Florida, enter the name of the s:		
new registered agent and/or the new registered office address	lress in Florida, enter the name of the s:		
Name of New Registered Agent  (Florida s.	lress in Florida, enter the name of the s:  W/A  reet address)		
Name of New Registered Agent	lress in Florida, enter the name of the s:  W/A  reet address)		

Signature of New Registered Agent, if changing

Check if applicable

☐ 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)

Example:

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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	Jennifer D. Grason	P.O Box 720484
Add			Orlando, FL 32872
Remove  X Change	P	Craig M. Grason	P.O. Box 701402
Add		<del></del>	Saint Cloud, FL 34770
Remove Change			
Add		·	
Remove 4) Change	<u>v</u>	Craig M. Grason	P.O Box 720484  Orlando, Fl. 32872
Add Remove Change			
Add			
Remove 6) Change			
Add			.,
Remove			

	(Be specific)		
		. 1/1.	
	<del></del>	NIA	
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	<del></del>		
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	<u> </u>		
an amendment provides for an exc	hange, reclassification	n, or cancellation of issued sh	ares,
provisions for implementing the am	hange, reclassification	n, or cancellation of issued sh ned in the amendment itself:	ares,
an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)	hange, reclassification rendment if not contain	ned in the amendment itself;	ares.
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provisions for implementing the am	change, reclassification cendment if not contain	ned in the amendment itself:	ares,
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provisions for implementing the am	change, reclassification	ned in the amendment itself;	
f an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)	change, reclassification	ned in the amendment itself;	

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The date of each amendment(s) adoption date this document was signed.	ion:, if other th
Effective date if applicable:	
Effective date it applicable.	(no more than 90 days after amendment file date)
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirements, this date will not be listed ment of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/were adopted action was not required.	I by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were suffic	by the shareholders. The number of votes east for the amendment(s) ient for approval.
☐ The amendment(s) was/were approv  must be separately provided for eac	ed by the shareholders through voting groups. The following statement h voting group entitled to vote separately on the amendment(s):
"The number of votes cast for	the amendment(s) was/were sufficient for approval
by	·"
	(voting group)
April 30, 2024 Dated	
selected, by	or, president or other office – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court iduciary by that fiduciary)
	ig M. Grason
_	(Typed or printed name of person signing)
Pre	sident

(Title of person signing)