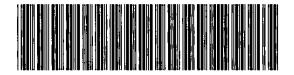
P09000010855

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
,

Office Use Only



000277702470

10/05/15--01025--027 **35.00

THOUGH AND STATE TALL AND ANALYSISE FLORIDA

OCT 0 7 2015 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Power FSM Group	, Inc.		
DOCUMENT NUMB	D00000010055			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this mai	tter to the following:		
	Paul Del Monte			
•		Name of Contact Persor	1	
	Mr. Tax, Inc.			
•	Firm/ Company			
	1311 Missouri Ave South		_	
	Address			
	Clearwater, Fl 33756			
		City/ State and Zip Code	2	
paul@	mrtax.net			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
		at ()	
Name o	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State.	
■ \$35 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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle	

Tailahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Power FSM Group, Inc.			
	f Corporation as currently	filed with the Florida Dept. of Sta	<u>te</u>)
P09000010855			
	(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corporation adopts the	following amendment(s) to
A. If amending name, enter the new na	me of the corporation:		- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
N/A			The new
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered." "professional associal B. Enter new principal office address, (Principal office address MUST BE A ST	ation "Corp," "Inc," or "C tion," or the abbreviation "P if applicable:	o". A professional corporation na	or the abhreviation
C. Enter new mailing address, if appli (Mailing address MAY BE A POST of the control of the cont	OFFICE BOX) d/or registered office addre	ss in Florida, enter the name of th	<u>e</u>
new registered agent and/or the nev	Enrico G Marchesini		
Name of New Registered Agent			
	1128 Sunset Pt Dr # 403		
	(Florida stree	et address)	22755
New Registered Office Address:	Clearwater	, Florid	
	(0	City)	(Zip Code)
New Registered Agent's Signature, if cl	ered agent. I am familiar wi MiGO Houled	ith and accept the obligations of the gistered Agent, if changing	position.

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: 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	PD	Enrico G Marchesini	1128 Sunset Pt Dr # 403
Add			Clearwater, Fl 33755
Remove			
2) Change	P D	Marina Puggelli	1128 Sunset Pt Dr # 403
Add	· · · · · · ·		Clearwater, Fl 33755
X Remove			
3)Change			
Add			
Remove			
4)Change	7.4.1		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
Ν/Λ	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
N/A	
	-
	-

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this dat Department of State's records.	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s sufficient for approval.)
	pproved by the shareholders through voting groups. The following stateme or each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	17	
	(voting group)	
☐ The amendment(s) was/were a action was not required	dopted by the board of directors without shareholder action and shareholde	r
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
09/24/15 Dated_		
Signature _	Funito Hartonmi.	
(By a selec	director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other countinted fiduciary by that fiduciary)	l
	Enrico G Marchesini	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

. . . .