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2022 SEP 23 AN 8: 2

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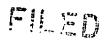
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: POWERLINE PRO	OMO INC	
DOCUMENT NUMBE			
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
A	NDREINA PACHECO		
_		Name of Contact Person	1
P	OWERLINE PROMO INC		
<u>-</u>		Elm/Company	
3.	470 SW 169 WAY	Firm/ Company	
_		Address	· · · · · · · · · · · · · · · · · · ·
N	IIRAMAR, FL. 33027		
		City/ State and Zip Code	2
p	owerlinepromo@gmail.com	l	
_	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
ANDREINA PACHECO)	at (<u>954</u>	274-5870
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is aicheck for t	he following amount made	payable to the Florida Depa	artment of State;
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



POWERLINE PROMO INC			2022 000 0
(<u>Name</u>	of Corporation as currently filed	with the Florida Dept. of Stat	<u>2022 SEP 23 AH 8:</u> 27
P12000068988			Segment of the second
	(Document Number of Corp	oration (if known)	MELAHASSER, ME
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this <i>Florid</i>	la Profit Corporation adopts the	following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
N/A			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Canthered," "professional association."	Corp," "Inc," or "Co". A prof		obreviation "Corp.,"
B. Enter new principal office address,	if applicable:	A	
(Principal office address MUST BE A S		· ,	
			
			····
C. Enter new mailing address, if appl (Mailing address MAY BE A POST			
(muning numers MAT BE ATOST	OTTICE BOX)		
			
D. If amending the registered agent ar		Florida, enter the name of the	<u>}</u>
new registered agent and/or the ne	w registered office address:		
Name of New Registered Agent	ANDREINA PACHECO		
	3470 SW 169 WAY		
	(Florida street ado	Iress)	
New Registered Office Address:	MIRAMAR	171 . 1	33027
	(City)	, Florida	(Zip Code)
			•
New Registered Agent's Signature, if c	hanging Registered Agent:		
I hereby accept the appointment as regist		nd accept the obligations of the p	osition.
	Λ		
	\1 1//	\cap	n at
	INDRANA POKECO	<u> </u>	<u>zsiden</u> i
\ /	Signature of New Register	red 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)

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>Y</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	PST	ELIED JIMENEZ	3470 169 WAY
Add			MIRAMAR, FL. 33027
X Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	
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f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,	
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
/A		
,		
		_

6/14/22	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
06/14/22	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder a action was not required.	action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	ent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	ements 22 SEP
"The number of votes cast for the amendment(s) was/were sufficient for approval	Z SEP 23 A
by	S - TT
(voting group)	111
6/14/22	₹ 2
Dated	
Signature DAMELO ARCHECO	
(By a director, president or other officer - if directors or officers have not be	en
selected, by an incorporator – if in the hands of a receiver, trustee, or other c	
appointed fiduciary by that fiduciary)	
ANDREINA PACHECO	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	