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(Re	equestor's Name)			
· (Ac	idress)			
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	: PETRO	CANADA	corpor	LATION	
DOCUMENT NUMBER:					
The enclosed Articles of Amen			iling.		
Please return all correspondence	e concerning this	matter to the fol	lowing:		
	MARIA	< C 501	JSA		
		Name of	Contact Persor	1	
	SOUSA	Name of A-SSC	CIATES	INC	
		Firm	Company		
43	45 WS	AND LAT	LE RD	, STE 304	
		А	ddress		
0	LLANDO,	FL 32819	<u> 1</u>		
		City/ Stat	e and Zip Code	e	
0.04	n 6 / //u	c A A t A C C A	oci name	(()200	
CATE) L @ 500 nail address: (to t	SUPPLIES FOR THE STATE OF THE S	annual report	notification)	
11	nan acaress. (10 t	ised for mane	annan report	Townson,	
For further information concern	ning this matter, p	olease call:			
MARIA CS	OUSA		407	de & Daytime Telephone Number	
Name of Contact	et Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check for the foll	owing amount m	ade payable to th	e Florida Depa	rtment of State:	
	43.75 Filing Fee ertificate of Statt	is Certified	nal copy is	□\$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			Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		
		Tallahassee, FL 32301			

Articles of Amendment to Articles of Incorporation of

PETRO CANAD	A CORPORAT	7 ON		
(Name of	Corporation as currently f	iled with the Florid	la Dept. of State)	
P17 000063935	<u> </u>			
	(Document Number of C	orporation (if know)	n)	
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this <i>Flo</i>	wida Profit Corpor	ution adopts the fol	llowing amendment(s) to
A. If amending name, enter the new nar	ne of the corporation:			
FIRST POWER				The new
name must be distinguishable and conta "Corp.," "Inc.," or Co.," or the designa word "chartered," "professional associati	tion "Corp," "Inc," or "Co	". A professional.	incorporated" or corporation name	the abbreviation must contain the
B. Enter new principal office address, if (Principal office address MUST BE A ST			 	
C. Enter new mailing address, if applie (Mailing address MAY BE A POST O				***************************************
D. If amending the registered agent and new registered agent and/or the new		s in Florida, enter	the name of the	<u> </u>
Name of New Registered Agent	Sousa- de	ASSOCIATE	S INC	
	7345 W SAI		RD, STE	304
New Registered Office Address:	ORLANDO		, Florida	32819
	iC.	ity)		(Zip Coae)
New Registered Agent's Signature, if ch		1		
I hereby accept the appointment as registe	red agent. I am familiar wit. Sumatura at New Rev	Hon	ligations of the pos.	ition.

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 officeridirector 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> 74</u>	John Do	<u>)c</u>	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>ZV.</u>	<u>Sally Şı</u>	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				4-4
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5/ Change				
Add				
Remove				
6) Change				
Add				
Remove				

	ticles, enter change(s) here: (Be specific)
<u> </u>	
	A
	
f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N(4)	
	

The date of each amendment(s) as	doption: <u>C6/26/20/8</u>	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, spartment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amend ifficient for approval.	linent(s)
	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment().	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	opted by the hoard of directors without shareholder action and sha	
action was not required.		
Dated	Jegis Jane.	
selecte	irector, president or other oricer – if directors or officers have no d, by an incorporator – if n the hands of a receiver, trustee, or oth ted fiduciary by that tiduciary)	t been er court
	* Desmond Toseph. (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	* PRESIDENT	
	(Title of person signing)	