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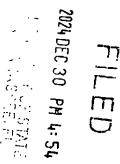
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: AME POWER SO	LUTIONS, INC	
	1BER: P17000081028		
	es of Amendment and fee are su	bmitted for filing.	
Please return all corr	respondence concerning this ma	itter to the following:	
	WILNY METELLUS		
		Name of Contact Person	1
		Firm/ Company	
	8763 FOREST HILLS BLVI		
	CORAL SPRINGS, FL 3306	Address 5	
		City/ State and Zip Cod	<u>. </u>
	MWILNY@AMEPOWERS	DLUTIONS.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, plea	se call:	
WILNY METELLU	s	at (⁹⁵⁴	de & Daytime Telephone Number
Name	e of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	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)
Ar Di P.G	ailing Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

0	of	
AME POWER SOLUTIONS, INC		
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)	
P17000081028		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendm	ient(s) to
A. If amending name, enter the new name of the corporation:		
MET POWER SOLUTIONS, INC	The ne	
name 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.	"company," or "incorporated" or the abbreviation "Corp., A professional corporation name must contain the wor	**
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	2024	
	DEC.	77
	<u> </u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	0 (S) (O)	; []]
(maining data ess MAT DE ATOST OFFICE BOX)	71. 3k	<u></u>
	- <u>- 유명 동</u> 무감 5	
	<u> </u>	
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office address		
Name of New Registered Agent		
(Florida s	street address)	
New Registered Office Address:	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	nt: r with and accept the obligations of the position.	

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	$\overline{\mathbf{b}}$	John Doc	
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) Change		_	
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
P.omovo			

(Attac	ending or adding additional Articles, enter change(s) here:
	h additional sheets, if necessary). (Be specific)
Ifan	amendment provides for an exchange reclassification or cancellation of issued charge
lf an	amendment provides for an exchange, reclassification, or cancellation of issued shares,
prov	isions for implementing the amendment if not contained in the amendment itself:
prov	amendment provides for an exchange, reclassification, or cancellation of issued shares, issued shares, issued shares tissued shares tissued shares tif not contained in the amendment itself:
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The date of each and date this document w		, if other than the
Effective date <u>if ap</u> p	plicable:	
	(no more than 90 days after amendment file date)	
	serted in this block does not meet the applicable statutory filing requirements, a date on the Department of State's records.	, this date will not be listed as the
Adoption of Amend	Iment(s) (CHECK ONE)	
☐ The amendment(s action was not rec	s) was/were adopted by the incorporators, or board of directors without sharehol quired.	der action and shareholder
	s) was/were adopted by the shareholders. The number of votes cast for the amerers was/were sufficient for approval.	ndment(s)
	s) was/were approved by the shareholders through voting groups. The following ly provided for each voting group entitled to vote separately on the amendment	
"The numbe	er of votes east for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
	12/23/2024 ned	
711	(By a director, president or other officer – if directors or officers have no selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	
	WILNY METELLUS	
	(Typed or printed name of person signing)	
	CEO	
	(Title of person signing)	