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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Pantheon Capital C	Group Inc		
DOCUMENT NUM	BER: 5263063457CC			
	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	Robert Houston			
	Name of Contact Person			
	Pantheon Capital Group Inc			
	Firm/ Company			
	10716 55th Ct East			
	Address			
	Parrish, FL 34219			
		City/ State and Zip Code	•	
	info@pcgmoney.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informatic	on concerning this matter, plea	se cull:		
Robert Houston		818 at (579-5215	
Name of Contact Person			de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	irtment of State:	
S35 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)	
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 lahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303	

Articles of Amendment to Articles of Incorporation of

Pantheon Capital Group Inc		
(Name of Corporation as curren	tly filed with the Florida De	pt. of State)
5263063457CC		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation	adopts the following amendment(s
A. If amending name, enter the new name of the corporation:		
		TV.
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.	A professional corporation	
B. Enter new principal office address, if applicable:	10716 55th Ct. East	E T
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Parrish, FL 34219	31
		PER P
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	10716 55th Ct. East	2: 56 2: 56
	Parrish, FL 34219	پر
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office address		ame of the
Name of New Registered Agent		
(Florida s	treet address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agen		(Zip Code)
I hereby accept the appointment as registered agent. I am familian	with and accept the obligation	ons of the position.
Signature of New	Registered Agent, if changing	<u> </u>

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>	<u>John Doe</u>		
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	TRES	Alecia Dulin	507 Kumquat Ct	
X Add			Sarasota, FL 34236	
Remove				
2) Change			2022 HAY	77
Add			AHASS	
Remove 3) Change		_	<u> </u>	LU.
Add				U
Remove			通じ 5	
4) Change				
Add				
Remove			-	
5) Change				
Add				
Remove				
6) Change	<u></u> -			
Add				
Remove				

E. <u>If amending or adding additional Articles, enter change(s) here:</u> (Attach additional sheets, if necessary). (Be specific)		
		<u>.</u>
		•
		-
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		<u>-</u>
		-
	- F.	
	A A	<u> </u>
	- 15 S	
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		-
	•	-
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)		
		<u>-</u>
		<u>-</u>
		_
		_
		-

The date of each amendment(s	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this Department of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or hoard of directors without shareholder	action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendm sufficient for approval.	
	approved by the shareholders through voting groups. The following stator each voting group entitled to vote separately on the amendment(s):	TANK AN ASS
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	SSS I
by		SEE P
	(voting group)) 1 2: 51
05/20/20	122	THE PARTY OF THE P
Dated	WI HI	
Signature	A JE	
(By a selection of the	a lifector, president or other officer – if directors or officers have not be red, by an incorporator – if in the hands of a receiver, trustee, or other of	en court
	ointed fiduciary by that fiduciary)	
	Robert Houston	
	(Typed or printed name of person signing)	
	CEO	
	(Title of person signing)	