P20000095142

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Decument Number)	
(Document Number)	
Certified Copies Certificates of Status	
2/12/21	
Special Instructions to Filing Officer:	
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Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 2, 2021

MARIE L. SARRIA ON-SITE ACCOUNTING, INC. 304 E. BAKER STREET, SUITE D PLANT CITY, FL 33565

SUBJECT: POWER LINES INC USA

Ref. Number: P20000095142

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

The name and title of the person signing the document must be noted beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 921A00002349

Susan Tallent Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Power Lines Inc. U	'SA 	
	BER: P20000095142		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Marie L. Sarria		
		Name of Contact Persor)
	On-Site Accounting, Inc.		
		Firm/ Company	
	304 E. Baker Street, Suite D		
		Address	
	Plant City, FL 33565		
		City/ State and Zip Code	
	Lizette@on-siteaccounting.ne	et	
	E-mail address: (to be us	ed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
John G. Jackson		813	de & Daytime Telephone Number
Name	of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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 V. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment to Articles of Incorporation of

Power Lines Inc. USA

(Name of Corporation as curren	tly filed with the Florida I	Dept. of State)
P20000095142		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this Articles of Incorporation:	s Florida Profit Corporatio	on adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:		
N/A		The new
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 corporatio	ed" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		~
		72:
C. Enter new mailing address, if applicable:	N1/ s	<u>ි</u> න
(Mailing address MAY BE A POST OFFICE BOX)	N/A	
		770
		7.
		<u> </u>
D. If amending the registered agent and/or registered office ad-		name of the
new registered agent and/or the new registered office addres	<u>ss:</u>	
Name of New Registered Agent N/A		
(Florida s	treet address)	
New Registered Office Address: N/A		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Ager I hereby accept the appointment as registered agent. I am familian		tions of the position
	and accept the orange	The position.
Signature of New	Registered Agent, if changi	ng
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	PΤ	<u>John Do</u>	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
<u>X</u> Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change			N/A	
Add				
Remove				
2) Change		_		
Add				
Remove 3) Remove		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change	-			
Add				
Remove				

!/A	ets, if necessary). (Be specific)
,,,,	
-	y.
If an amendment propositions for imple	evides for an exchange, reclassification, or cancellation of issued shares, menting the amendment if not contained in the amendment itself: \(\text{indicate N/A} \)
provisions for imple (if not applicable	menting the amendment if not contained in the amendment itself:
provisions for imple (if not applicable	menting the amendment if not contained in the amendment itself: v. indicate N/A)
provisions for imple (if not applicable IE NUMBER OF SHA	menting the amendment if not contained in the amendment itself: v. indicate N/A)
provisions for imple (if not applicable) HE NUMBER OF SHA	menting the amendment if not contained in the amendment itself: v. indicate N/A)
provisions for imple (if not applicable) HE NUMBER OF SHA	menting the amendment if not contained in the amendment itself: v. indicate N/A)
provisions for imple (if not applicable) HE NUMBER OF SHA	menting the amendment if not contained in the amendment itself: v. indicate N/A)

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	December 15, 2020	
The date of each amendment(s) a	doption:	, if other than
date this document was signed.		
Dec Effective date if applicable:	ember 15, 2020	
Effective date a appareative.	(no more than 90 days aj	fier amendment file date)
Note: If the date inserted in this I document's effective date on the D		tutory filing requirements, this date will not be listed as
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of	directors without shareholder action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were so	opted by the shareholders. The number officient for approval.	r of votes cast for the amendment(s)
☐ The amendment(s) was/were ap nust be separately provided for	proved by the shareholders through vot each voting group entitled to vote sep-	ting groups. The following statement arately on the amendment(s):
"The number of votes cast	for the amendment(s) was/were suffic	ient for approval
by <u>N/A</u>		··
•	(voting group)	
	Signature (By a director, president or oth selected, by an incorporator – appointed fiduciary by that fid	ner officer – if directors or officers have not been if in the hands of a receiver, trustee, or other court duciary)
	(Typed or p	printed name of person signing)
	OWNER (Title of person signing	P