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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ΓΙΟΝ: G.A Power Electric	: Corp	
DOCUMENT NUMBER	P2300005225		
The enclosed Articles of	Amendment and fee are sub	omitted for filing.	
Please return all correspo	ndence concerning this mat	ter to the following:	
		Natalie M. Adams	
-		Name of Contact Person	
		Tax Services, LLC	
		Firm/ Company	
		220 NE 51st Street	
	 -	Address	
		Oakland Park, FL 33334	
		City/ State and Zip Code	-
		office@taxservfl.com	
_	E-mail address: (to be us	ed for future annual report	notification)
For further information c	oncerning this matter, pleas	se call:at (271-4441
Name of (Contact Person	at (Area Coo	de & Daytime Telephone Number
	ne following amount made		•
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amenc Divisio P.O. B	g Address Iment Section on of Corporations ox 6327 assee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

G.A Power Electric Corp

(Name of Corporatio	n as currently filed with the Fl	orida Dept. of State)	
· · · · · · · · · · · · · · · · · · ·	P2300005225	2023163 10	FH 4: 35
(Docume	ent Number of Corporation (if kr	nown)	• • •
ursuant to the provisions of section 607.1006, Florida s Articles of Incorporation:	Statutes, this Florida Profit Corp	poration adopts the follow	wing amendment(s)
If amending name, enter the new name of the co	rporation:		
ame must be distinguishable and contain the word "co. Inc.," or Co.," or the designation "Corp," "Inc," chartered," "professional association," or the abbrev	or "Co". A professional cor	orporated" or the abbrevi poration name must coi	The new iation "Corp" stain the word
. Enter new principal office address, if applicable:			
Principal office address <u>MUST BE A STREET ADD</u>	<u>RESS</u>)	<u> </u>	
	 ,		
2. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u></u>		
. If amending the registered agent and/or register new registered agent and/or the new registered of		ter the name of the	
Name of New Registered Agent			
	·	<u> </u>	
	(Florida street address)		
New Registered Office Address:	(City)	, Florida	Zip Code)
	(5.0)	`	•
lew Registered Agent's Signature, if changing Reginereby accept the appointment as registered agent.	i <mark>stered Agent:</mark> I am familiar with and accept the	obligations of the positi	on.
· · · · · · · · · · · · · · · · · · ·	nture of New Registered Agent, if	changing	
Signa	ниге од њем кедімеген адет, ц	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 = ChiefExecutive 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>	John Doe	
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	P	Galicia Alva, Genobebi H.	2065 NE 53rd Court
Add			Pompano Beach, FL 33064
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

чаўн <i>ааанюнаі sne</i>	ng additional Artivets, if necessary).	(Be specific)				
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an amendment pr	rovides for an excl	hange, reclassifi	cation, or canc	ellation of issu	ied shares,	
rovisions for impl	lementing the amo le, indicate N/A)	endment it not c	ontained in the	e amendment i	itseit:	
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					<u>-</u>	<u> </u>
		_ -				
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The date of each amendment(s) adoption this document was signed.	otion:	, if other than th
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file	date)
Note: If the date inserted in this bloc document's effective date on the Depa	k does not meet the applicable statutory filing require timent of State's records.	ements, this date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted action was not required.	ed by the incorporators, or board of directors without sh	nareholder action and shareholder
■ The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes cast for the	e amendment(s)
☐ The amendment(s) was/were appro must be separately provided for ea	ved by the shareholders through voting groups. The fol ch voting group entitled to vote separately on the amen	llowing statement dment(s):
"The number of votes cast fo	the amendment(s) was/were sufficient for approval	
by	(voting group)	
	7 2023 ctor, president or other officer – if directors or officers	
selected,	ctor, president or other officer – if directors or officers by an incorporator – if in the hands of a receiver, trusted fiduciary by that fiduciary)	have not been e, or other court
<u></u>	(Typed or printed name of person signing)	υ Α
f	MESIDENT (Title of person signing)	
-	(Title of person signing)	