P23000046088

(Requestor's Name)	
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(Only) States Eight Home my	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COI	RPORATION: LIMITLESS TV I	NC.		
DOCUMENT N	SUMBER: P23000046088			
	ticles of Amendment and fee are so	abmitted for filing.		
Please return all	correspondence concerning this ma	atter to the following:		
	Evelyn Espinoza Diaz			
		Name of Contact Persor		
	OE Miami Inc.			
	-	Firm/ Company		
	701 Brickell Avenue, Suite 1	1550		
		Address	· · · · · · · · · · · · · · · · · · ·	
	Miami, Florida 33131			
		City/ State and Zip Code	2	
	eespinoza@officeedge.com			
		sed for future annual report	notification)	
For further information Evelyn Espinoza	mation concerning this matter, plead in Diaz	ase call:at (, 728-5200	
Name of Contact Person		at (Area Co-	de & Daytime Telephone Number	
	eck for the following amount made			-
■ \$35 Filing F	Tee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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	Amend Division The Co 2415 Y	Address Intent Section on of Corporations entre of Tallahassee d. Monroe Street, Suite 810 ussee, FL 32303	

Articles of Amendment to Articles of Incorporation of

LIMITLESS TV INC.	rrently filed with the Florida Dept. of State)
P23000046088	rrentiv nica with the Fiorita Dept. of State)
	nber of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes its Articles of Incorporation:	s, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporati	on:
	The new on, ""company," or "incorporated" or the abbreviation "Corp.," o". A professional corporation name must contain the word "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ac	
Name of New Registered Agent	
(Flo)	rida street address)
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changing Registered . Thereby accept the appointment as registered agent. I am fan	Agent: niliar with and accept the obligations of the position.
Signature of a	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:

Remove

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 Doc 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	
\underline{X} Remove	\underline{V}	Mike Jones	
X Add	<u> </u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	SEILER, MICHAEL	642 MOULTON AVE #W2
Add X Remove			LOS ANGELES, CA 90031
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change		-	
Add			
Remove			······································
5) Change			
Add			
Remove			
6) Change			
Add			

. If amending or adding additional Art (Attach additional sheets, if necessary).	(Be specific)	
		, ,
If an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
		:
		<u> </u>
		7.
-		
		7.

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The date of each amendment(s) adopti	on:	, 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 this block document's effective date on the Departi	does not meet the applicable statutory filing requirements, nent of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors without sharehole	der action and shareholder
■ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the amerent for approval.	dment(s)
	d by the shareholders through voting groups. The following voting group entitled to vote separately on the amendment	
	ne amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
10/3	/2023	
DutedDocusi		
(a)	11	
Signature By a director	repressident or other officer – if directors or officers have no	
	an incorporator – if in the hands of a receiver, trustee, or otl	
appointed fi	duciary by that fiduciary)	, , , , , ,
	George Hawatmeh	
	(Typed or printed name of person signing)	:
		:
	Vice President	
	(Title of person signing)	<u>(5)</u>