P02000116342

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate:	s of Status
Special Instructions to I	Filing Officer:	





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11/08/11--01805--008 **35.80



Amend 11/15/11/ De

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: EIGHT DA	YS A WEEK	
DOCUMENT NUMBER: P94000079848		
The enclosed Articles of Amendment and fee at	re submitted for filing.	
Please return all correspondence concerning thi	-	
	Ç	
CLAUDIA HERNANDE	Ζ.	
Name o	of Contact Person	
EIGHT DAYS A WEEK		
Fir	m/ Company	······································
7309 EAST COLONIAL I	DR	
	Address	
ORLANDO, FL 32807		
	tate and Zip Code	
CLAUDIADBEST1@YA	HOO.COM	
E-mail address: (to be used	d for future annual report notification	
For further information concerning this matter.	please call:	
To runte morning and many	produce carri	
CLAUDIA HERNANDEZ	at (407) 879-392	24
Name of Contact Person	at (407) 879-392 Area Code & Daytime	Telephone Number
Enclosed is a check for the following amount m	nade payable to the Florida Dep	partment of State:
\$35 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)
Mailing Address	Street Address	
Amendment Section	Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327 Clifton Building Tallahassee, El. 32314 2661 Executive Center Circle		rele

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

EIGHT DAYS A WEEK, INC. (Name of Corporation as currently filed with	the Florida Dent of State)	
	ine runda Dept. of State)	
P9400079848 (Document Number of Corporati	ion (if known)	
Pursuant to the provisions of section 607.1006, Florida Statu following amendment(s) to its Articles of Incorporation:	tes, this <i>Florida Profit Co</i>	rporation adopts the
A. If amending name, enter the new name of the corporatio	<u>n:</u>	
N/A		-
The new name must be distinguishable and contain the "incorporated" or the abbreviation "Corp.," "Inc.," or Co. "Co". A professional corporation name must contain association," or the abbreviation "P.A."	.," or the designation "Co	rp, " "Inc," or
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS)		上省 老
C. Enter new mailing address, if applicable:	N/A	NOV -8 AM
(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 ad		the name of the
Name of New Registered Agent: N/A	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address: (Flor	ida street address)	
		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered A l hereby accept the appointment as registered agent. I am	Agent: familiar with and accept t	the obligations of the
position.		
Cimpeture of Mon	Registered Agent if chang	ino

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

Title(s)	Name		Address	
1) <u>P</u>	QUISQUEYA NUÑEZ	7309 EA	ST COLONIAL DRIVE	
		ORLANDO.	FL 32807	
2) <u>VP</u>	CLAUDIA HERNANDEZ	7309 EA	ST COLONIAL DRIVE FL 32807	
3)				
4)				
5)				
6)				
If REMOVING removed:	an officer and/or director, please	list the title(s) an	d name of the officer	-/director to be
Title(s)	<u>Name</u>	Title(s)	<u>Name</u>	
1)		4)	4-1-00-1-1-1	
2)		5)		
3)		6)		

, , –	amending or adding additional Articles, enter change(s) here
(a/	ach additional sheets, if necessary). (Be specific)
/A	
	•
р	an amendment provides for an exchange, reclassification, or cancellation of issued shares, rovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) SQUEYA NUÑEZ 75% SHAREHOLDER
LA	UDIA HERNANDEZ 25% SHAREHOLDER
	•

The date of each amendment(a) adaption - 10/01 /1-1
Effective date if applicable:	s) adoption: 10/01/1-1 10/01/1 (date of adoption - required) (no more than 90 days after amendment file date)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes of	ast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voing group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated/	Mudu Hunguda
Signature	Claude Henande
selec	a director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other court sinted fiduciary by that fiduciary)
	CLAUDIA HERNANDEZ
	(Typed or printed name of person signing)
	VP
	(Title of person signing)