## P130003060

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SECRETARY OF STATES

OCT, 1.7 2013

R. WHITE

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: NORN DOCUMENT NUMBER: 1300007	ИА WEEKE /3060	ND IN	IC	
The enclosed Articles of Amendment and fee	e are submitted for fil	ing.		
Please return all correspondence concerning t	his matter to the follo	owing:		
JHON ROD	RIGUEZ			
JIREH MUL		ontact Person		
3095 S MIL		Company AIL # 4	1	
LAKE WOF		dress 463		
	City/ State	and Zip Cod	2	
E-mail address: (1 For further information concerning this matte	o be used for future a	innual report	notification)	
JHON RODRIGUEZ	at	561	,57491110	
Name of Contact Person			de & Daytime Telephone Number	
Enclosed is a check for the following amount	made payable to the	Florida Depa	artment of State:	
■ \$35 Filing Fee □\$43.75 Filing F Certificate of \$1		Copy al copy is	☐\$52.50 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 Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle assee, FL 32301	

## **Articles of Amendment** Articles of Incorporation

FILED OCT -9 PH 12: 32

NORMA WEEKEND INC

(Name of Corporation as currently filed with the Florida Dept. of State)

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(Document Number	er of Corporation (if I	nown)			-
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this F	orida Profit Corp	oration add	opts the followin	g amendment(s
A. If amending name, enter the new name of th	ne corporation:				
N/A					The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Cword "chartered," "professional association," or	Corp," "Inc," or "C	o". A profession			– bbreviation
'		N/A	,-	•	
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET)					-
					-
					_
C. Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE	BOX)				-
			<del></del>		-
D. If amending the registered agent and/or reginew registered agent and/or the new registered.		<u>s in Florida, entc</u>	er the name	e of the	
N/A					
Name of New Registered Agent					
	(Florida stree	(nddrosy)			
	ir im ita anet	шинезту			
New Registered Office Address:	(City)		_, Florida	(Zip Code)	=
	•				
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ages		h and appoint the	shligations	of the nosition	
r nervery accept the appointment as registered ages	nı i anı jamınar wii	н ана ассері іне с	ouganons	ој ше ромион.	
<u></u>	of View Descriptions I to	met if abandon			
Signature o	of New Registered Ag	ent, if changing			

## 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 = 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.

Example: X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
() Change	P,VP	ELI S. PALACIOS	1045 COUNTRY CLUB DF
Add			APT 408
Remove			MARAGATE FL 33063
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

•	cles, enter change(s) here: (Be specific)
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radda— and days on an analysis of the an	
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:

date this document was signed.	loption:	, if other than th
Effective date if applicable:		
<u></u>	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated 10/05/20	$\langle e^{i}/\sqrt{2}/\sqrt{2}\rangle$	
selecte	rector, president or other officer – if directors or officers have not been it, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	ELI S. PALACIOS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	