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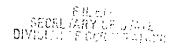
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: NORSMAN REAL	ESTATE GROUP PA	
DOCUMENT NUMBI	ER: P16000002567		
	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
N	MARY SCHOUW		
-		Name of Contact Person	1
у	MARY SCHOUW P.A.		
_		Firm/ Company	
8	402 MALLOW LANE		
_		Address	
7	IAPLES, FLORIDA 34113		
_		City/ State and Zip Code	:
CMSC	HOUW@COMCAST.NET		
	E-mail address: (to be us	sed for future annual report	notification)
For further information MARY SCHOUW	concerning this matter, pleas		248-1057
		at (239) 270-1057
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	ertment 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 Fce Certificate of Status Certified Copy (Additional Copy is enclosed)
Amen Dívisi P.O. I	ng Address dment Section ion of Corporations Box 6327 nassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of



16 JAN 19 AH 10: 46

NORSMAN REAL ESTATE GROUP PA		
	ion as currently filed with the Flo	rida Dept, of State)
P16000002567		
(Docum	nent Number of Corporation (if kno	own)
Pursuant to the provisions of section 607.1006, Floridatis Articles of Incorporation:	a Statutes, this Florida Profit Corp	oration adopts the following amendment(s)
A. If amending name, enter the new name of the co	orporation:	
MARY SCHOUW P.A.		The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the	," "Inc," or "Co". A professiona	"incorporated" or the abbreviation
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BO</u>	<u></u>	
D. If amending the registered agent and/or register new registered agent and/or the new registered	ed office address in Florida, ente office address:	r the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regi hereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept the o	bligations of the position.
Sinus	ture of Nov Peristaned Agent if ch	and the

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 D	<u>oc</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
_X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change		_		
Add				
Remove				
2) Change				
Add		_		
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
O. Cherry				
δ)Change				
Add				
Remove				

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	
an amendment provides for an exch	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nument is not contained in the amendment issue.
	. <u></u>

•	JANUARY 13, 2016	
The date of each amendment(s date this document was signed.) adoption:	if other than the
J Effective data if annihants	ANUARY 13, 2016	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date will Department of State's records.	ll not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	16 J
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	,,	- 9 影響
	(voting group)	==
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	16 JAN 19 AM 10: 46
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
JANUA Dated Signature	Mary Schouw	
(By selec	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)	
	MARY SCHOUW	
	(Typed or printed name of person signing)	
	INCORPORATOR AND PRESIDENT	
	(Title of person signing)	··