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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: NORMAL TRAD	E INC				
DOCUMENT NUM	P18000085602	<u> </u>				
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.				
Please return all corre	espondence concerning this ma	atter to the following:				
	JACK LEVINE PA					
		Name of Contact Perso	n			
	JACK LEVINE CPA					
		Firm/ Company				
	3050 BISCAYNE BLVD ST	TE 302				
		Address				
	MIAMI, FL 33137					
		City/ State and Zip Cod	c			
Л:@	JACKLEVINECPA,COM					
	E-mail address: (to be u	sed for future annual report	notification)			
For further information	on concerning this matter, pleas	se call:				
JACK LEVINE		at (305	912-0081 de & Daytime Telephone Number			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:			
S35 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

NORMAL TRADE INC (Name of Corporation as currently filed with the Florida Dept. of State) P18000085692 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: POTENZA TRADE INC name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.." or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." N/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: N/A (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Do	<u>v</u>	
X Remove	<u>Y</u>	Mike Jo	<u>nes</u>	
X Add	<u>8V</u>	Sally Su	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add			-	
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_	_	
Add		_		
Remove				
6) Change				
Add		_		
Remove				
Kemove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
N/A

	08/28/2019	
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
	8/28/2019	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a by the shareholders was/were	idopted by the shareholders. The number of votes east for the amendment sufficient for approval.	u(s)
☐ The amendment(s) was/were a must be separately provided j	approved by the shareholders through voting groups. The following state for each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were action was not required.	dopted by the board of directors without shareholder action and shareho	lder
The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and shareholder	
()8/28/2(19	
Dated	Jul faile	
selec	director, president or other officer – if directors or officers have not bed ted, by an incorporator – if in the hands of a receiver, trustee, or other edinted fiduciary by that fiduciary)	en Ourt
	JORGE A BENITEZ OJEDA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	