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(((H23000297974 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: LAMADRID FINANCIAL SERVICES CORP Account Name

Account Number : 120200000059 : (954)727-9771 Phone : (954)727-9773 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GROUP DIAMOND PARTS LLC

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Corporate Filing Menu

Help

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T. LEMIEUX

AUG 2 9 2023

· < HZ3000797197437 COVER LETTER

TO: Reg	ision of Corpo	prations	; , ,	ş
	GROUP DIA	MOND PARTS LLC		
SUBJECT:		Name of Limite	d Liability Company	
The enclose	d Articles of A	mendment and fee(s) are subm	itted for filing.	
Please retur	n all correspon	dence concerning this matter to	the following:	
		VANESSA SANCHEZ		
			Name of Person	
		GROUP DIAMOND PART	S LLC	
			Finn/Company	
		4100 NW 135TH STREET	UNIT 5A	
			Address	
		OPA-LOCKA, FL 33054		
			City/State and Zip Code	
		grupodiamondparts@gmail.	com o be used for future annual report	notification)
For further	r information co	oncerning this matter, please ca		
	A SANCHEZ		305 389-559	
	Name o	f Person	Area Code Da	sytime Telephone Number
Enclosed i	is a check for th	ne tollowing amount:		
	0 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fce, Certificate of Status & Certified Copy (additional cupy is enclosed)
]	Mailing Addre Registration Division of G P.O. Box 63: Tallahassee,	Section Corporations 27	The Centre 2415 N. M	

< H23000297974 3> ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

GROUP DIAMOND PARTS LLC		
(Name of the Limited Lizblity Com (A Florida Limite	pany 25 it now appears on our records.) 1 Liability Company)	
The Articles of Organization for this Limited Liability Compar		igned
Florida document number L23000294964		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
DIAMOND DARTS GROUP III		
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or the abbreviation "L.	L.C."
Enter new principal offices address, if applicable:	5271 SW 8th Street Apt 213	
Enter new principal offices address, it application. (Principal office address MUST BE A STREET ADDRESS)	Coral Gables, FL 33134	
and the second second	N/A	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	7	
	· · · · · · · · · · · · · · · · · · ·	
B. If amending the registered agent and/or registered offi	ce address on our records, enter the name of the ne	w regis
agent and/or the new registered office address here:	N ∞	
Name of New Registered Agent: N/A	27 F	r-
radic of frew registered regist.		
New Registered Office Address:	Enter Florida street oddress	
	l'Invide	
	City , Florida Zip Code	

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Change

2 H 23000 29 79 74 3 >
If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

$AMBR = A$ \underline{Title}	Name	Address	Type of Action
	N/A		□ Add
			□Remove
			[]Change
			□Add
			□Remove
			□Change
			🗖 Add
			Remove
			Change
			□Add
			CRemove
			Change
			□Remove
			□Add
			□Remove

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08/28/2023	ontional)
effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days	after filing.) Pursuant to 605.0207
: If the date inserted in this block does not meet the applicable statutory thing requirements	s, this date will not be listed as
ment's effective date on the Department of State's records.	
	and the same and the same
	of: (b) The 90th day after the
filed.	
d·	
Vanocca Sanchez	
VUIRDY JUILIE	
Signature of a memoer of authorized representative of a memoer	
VANESSA SANCHEZ	
or fil	ive date, if other than the date of filing: ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days. If the date inserted in this block does not meet the applicable statutory filing requirement ent's effective date on the Department of State's records. It is a specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier led.

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