117000026495

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Office Use Only



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SECRETARY OF STATE
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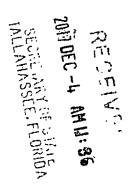
FLORIDA DEPARTMENT OF STATE Division of Corporations

November 21, 2017

MARIA GONZALEZ 3107 NE 4TH ST HOMESTEAD, FL 33033

SUBJECT: DIAMOND INVESTMENT LLC

Ref. Number: L17000026495



We have received your document for DIAMOND INVESTMENT LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

The document number of the name conflict is P04690.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons Regulatory Specialist II

Letter Number: 317A00023658



July 31, 2017

MARIA GONZALEZ 3107 NE 4TH ST HOMESTEAD, FL 33033

SUBJECT: DIAMOND INVESTMENT LLC

Ref. Number: L17000026495

We have received your document for DIAMOND INVESTMENT LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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The document number of the name conflict is P04690.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons Regulatory Specialist II

Letter Number: 317A00015382



June 27, 2017

MARIA GONZALEZ 3107 NE 4TH ST HOMESTEAD, FL 33033 **2ND MAILING***

We have received your document for DIAMOND INVESTMENT LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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The document number of the name conflict is P04690.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia I Simmons Regulatory Specialist II

> RETARY OF STA THASSEE. FLOR

Letter Number: 017A00013031



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 14, 2017

MARIA GONZALEZ 3107 NE 4TH ST HOMESTEAD, 30333

SUBJECT: DIAMOND INVESTMENT LLC

Ref. Number: L17000026495

We have received your document for DIAMOND INVESTMENT LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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The document number of the name conflict is P04690.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia I Simmons Regulatory Specialist II

Letter Number: 517A00012021

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SECHETARY DE STATE

COVER LETTER

	Division of Cor	porations		
SH.	ВЈЕСТ:	DIAMOND INVESTM	IENT LLC	
50	Dober		ited Liability Company	
The	e enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Ple	ase return all correspo	ndence concerning this matter	to the following:	
		MARIA D	E LOS ANGELES GONZALE	Z
			Name of Person	
		AMARO A	CCOUNTING SERVICES PA	
			3107 NE 4TH STREET	
		<u></u>	Address	
		НОМ	MESTEAD FLORIDAD 33033	
			City/State and Zip Code	
		E mail addraga.	magaccounting@att.net to be used for future annual report	notification)
-			•	notification)
10	r turther information c	oncerning this matter, please c	au:	•
	MARIA DE LOS	ANGELES GONZALEZ		556-3424
	Name o	f Person	at () Area Code Da	ytime Telephone Number
En	closed is a check for t	he following amount:		
	\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section

TO:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NVESTMENT LLC		
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New Registered Agent's Signature, if changing Registered Agent:

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

If amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person_being added or removed from our records</u>:

MGR = Manager

AMBR ≈ A	authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00