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(Req	juestor's Name)	
(Add	lress)	
. (Add	lress)	
(City	/State/Zip/Phon	e #)
- PICK-UP	WAIT	MAIL,
(Bus	iness Entity Nar	me)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	·

Office Use Only



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06 SEP 13 PM 2: 22 SECRETARY OF STATE

MPa/13

COVER LETTER

TO:	New Filing S Division of C				
SUBJ	ECT:	DIAMOND (XYNC	CORPORATI	ON
5020		(Name of corp	oration -	must include suffix)
Dear S	Sir or Madam:				
"Certi		cation by Foreign Corporation nce," and check are submitte lorida.			
Please	return all corre	espondence concerning this i	natter to	the following:	
		Juan	A. Sid	berry	
		(Na	me of Pe	rson)	
		Diamond (Onyx C	Corporation	
		(Fir	m/Comp	any)	
				h Street	
			(Address		
		Pembroke P	ines, F	Florida 33026	
		(City/S	State and	Zip code)	
For fu	rther information	on concerning this matter, pl	ease call	:	
	Juan A. Si	idberry at (954 ₎	559-0701	
	(Name of Pe	rson) (Area Coo	le & Daytime Telep	hone Number)
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			
Enclos	sed is a check f	or the following amount:			
\$7 0	.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status		78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status.& Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1.	DIAMOND	ONYX	CORPORATION	
	corporation; must include "INCOR Corp," "Inc," "Co," or "Corp.")	PORATED,'	' "COMPANY," "CORPORATION,"	
	٠,			
(If name unavail	lable in Florida, enter alternate corp	orate name	adopted for the purpose of transacting b	usiness in Florida)
2.	Delaware	3.	20-5369884	
(State or country	Delaware under the law of which it is incorp	orated)	(FEI number, if applica	ble)
	agust 10, 2006	5.	Perpetual (Duration: Year corp. will cease to ex	
(Date	e of incorporation)		(Duration: Year corp. will cease to ex	ist or "perpetual")
6	no t	ransacti	ons yet	
			n Florida, if prior to registration) 02, F.S., to determine penalty liability)	
7.	10605 N.W. 8th St	treet, Pe	mbroke Pines, FL 33026	
	(Principa	al office addi	ress)	
	10605 N.W. 8th St	treet, Pe	embroke Pines, FL 33026	
(Purpose(s	s) of corporation authorized in hom	ne state or co	untry to be carried out in state of Florida	
9. Name and stree	et address of Florida registered a	agent: (P.O	Box NOI acceptable)	06 S=
Name:	Juan A. Sidberry			06 SEP SECRET
Office Address:	10605 N.W. 8th Stre	et		P 13
	Pembroke Pines		, Florida 33026	المراسين
	(City)		(Zip code)	PM 2: OF STA
Having been nam designated in this further agree to o	application, I hereby accept th	he appointn ll statutes re	ce of process for the above stated cont as registered agent and agree to elative to the proper and complete position as registered agent.	rporation at the pla act in this capacity

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

under the law of which it is incorporated.

12. Name	es and business addresses of officers and/or directors:
A. DIRE	
Chairman:	Juan A. Sidberry
Address: _	10605 N.W. 8th Street
	Pembroke Pines, FL 33026
Vice Chair	man:
Address: _	
Director: _	
Address: _	
_	
Director:	
_	
B. OFFI	CERS
	Juan A. Sidberry
	10605 N.W. 8th Street
_	Pembroke Pines, FL 33026
Vice Presid	lent:
Address	
Secretary:	Juan A. Sidberry
occionary.	10605 N.W. 8th Street, Pembroke Pines, FL 33026
Treasurer:	Juan A. Sidberry
	10605 N.W. 8th Street, Pembroke Pines, FL 33026
NOTE: I	f necessary, you may attach an addendum to the application listing additional officers and/or directors.
13	/wan_
	(Signature of Director or Officer listed in number 12 of the application)
14	Juan A. Sidberry, President (Typed or printed name and capacity of person signing application)
	(Typed of printed name and capacity of person signing application)

PAGE 1

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DIAMOND ONYX CORPORATION" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTH DAY OF SEPTEMBER, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DIAMOND ONYX CORPORATION" WAS INCORPORATED ON THE TENTH DAY OF AUGUST, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.





Warriet Smith Windson

AUTHENTICATION: 5019906

DATE: 09-05-06

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