Page 1 of 1

Division of Corporations

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Division of Corporations

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Account Number : 120110000092

Phone

: (305)448-9584

Fax Number

: (305)448-9569

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**EXAMINER** 

## COVER LETTER

Division of Corporations  SUBJECT: DIAMOND SECURITY INTERNATIONAL LLC  Name of Limited Liability Company  The enclosed Articles of Amendment and fee(s) are submitted for filling.  Please return all correspondence concerning this matter to the following:  \[ \begin{align*} \textit{ZULFIQAR MITHAVAYANI} \\ \textit{Name of Person} \\ \textit{DIAMOND SECURITY INTERNATIONAL LLC} \\ \textit{Firm/Company} \\ \textit{163 NW 14TH ST} \\ \textit{Address} \\ \textit{MIAMI, FL 33136} \\ \textit{City/State and Zip Code} \\ \textit{E-mail address: (to be used for future annual report notification)} \end{align*}  For further information concerning this matter, please call:  \textit{ZULFIQAR MITHAVAYANI} \textit{at (964)} \textit{274-1901}		COVER ESTIEN	お影響
Please return all correspondence concerning this matter to the following:    ZULFIQAR MITHAVAYANI	TO:	Registration Section Division of Corporations	1 2 C
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ZULFIQAR MITHAVAYANI  Nume of Person  DIAMOND SECURITY INTERNATIONAL LLC  Firm/Company  163 NW 14TH ST  Address  MIAMI, FL 33136  City/State and Zip Code  E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:  ZULFIQAR MITHAVAYANI  at ( 964 ) 274-1901	The en	closed Articles of Amendment and fee(s) are submitted for filing.	<del>ن</del> ت
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ZULFIQAR MITHAVAYANI at ( 954 ) 274-1901		E-mail address: (to be used for future annual report notification)	
a(\	For fur	ther information concerning this matter, please call:	
		ZULFIQAR MITHAVAYANI at / 964 \ 274-1901	
- and the man taken and the taken and taken and taken and the taken and taken		Name of Person Area Code & Daytime Telephone Number	<del></del>
	Enclos	ed is a check for the following amount:	

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



DIAMOND SECURITY INTERNATIONAL LLC

The Articles of Organization for this Limited Liability Compa	any were filed on _	09/05/2007	and assigned
Florida document number L07000091036			•
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited i	iability company	<u>here</u> :	
The new name must be distinguishable and end with the words "L" L.L.C."	imited Liability Con	mpany," the designation "I	LLC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS	2		
Enter new mailing address, if applicable:	<u> </u>		
(Mailing address MAY BE A POST OFFICE BOX)			·
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		on our records, enter	the name of the new
Name of New Registered Agent:			
New Registered Office Address:		Enter Florida street ada	bress
		, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Pegistered Age	amée .		

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 608, 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

MGR = Manager

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGRM = Managing Member <u>Title</u> <u>Name</u> Address Type of Action **MGRM** SALIMA MITHAVAYANI <u>2065 SW 176TH AVE</u> ☐ Add MIRAMAR, FL 33029 ✓ Remove ☐ Add Remove ☐ Add Remove ∐ Vqq Remove Remove ∐Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) **JULY 05** 

ZULFIQAR MITHAVAYANI
Typed or printed name of signee

Page 2 of 2 Filing Fee: \$25.00

Signature of a member of authorized representative of a member