L09000107585

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TALLAHASSES FLORIDA

B. BOSTICK JAN **- 2** 2013

EXAMINER

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

DIAMOND CLEAN, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Evgeniy Karavaikin

Name of Person

MGRM, Diamond Clean, LLC

Firm/Company

1789 Biscayne Blvd.

Address

Miami, FL 333132

City/State and Zip Code

kuruma2000@mail.ru

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Evgeniy Karavaikin

₃₁,786 303-6769

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the 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 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

DIAMOND CLEAN, LLC		
(<u>Name of the Limited Liability</u> (A Florida I	Company as it now appears on our recommitted Liability Company)	<u>)rds.</u>)
The Articles of Organization for this Limited Liability C	company were filed on Nov. 9, 2009	and assigned
Florida document number L09000107585	•	
This amendment is submitted to amend the following:	•	
A. If amending name, enter the new name of the limit	ited liability company here:	
The new name must be distinguishable and end with the wor "L.L.C."	ds "Limited Liability Company," the design	gnation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	NESS)	
		
Enter new mailing address, if applicable:		23 TAL
(Mailing address MAY BE A POST OFFICE BOX)	**************************************	<u> </u>
		SS: 65
B. If amending the registered agent and/or regist		
registered agent and/or the new registered office add	<u>ress here</u> :	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida s	treet address
·	, Flo	orida
	Citv	Zip Code

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 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 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:

MGR = Manager MGRM = Managing Member **Title** <u>Name</u> **Address Type of Action Devon Smith MGRM** 2138 SW 195th Ave., Miramar, FL 33029 Remove **Devane King** 16900 North Bay Rd., Sunny Isles, FL 33160 MGRM Add Remove Remove Remove Remove

If amending any other information, ent	er change(s) here: (Attach additional sheets, if necessary.)
December 21	2013
24	, <u></u>
Signature of	a member or authorized representative of a member
Evgeniy Karavaikin	
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

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