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SECRETARY OF STATE
TALLAHASSEE FLORIE



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Didamarvi Enterprises, Inc.				
DOCUMENT NU	мвек: <u>PO100008</u>	7262	I	
The enclosed Artic	les of Amendment and fee a	re submitted for filing.		
Please return all co	rrespondence concerning thi	is matter to the following:		
		M. Moscowitz, Esq.		
	(
	•	s of Grover M. Moscowitz, Esq.		
	(Firm/ Company)			
	701 Brick	kell Avenue - Ste. 1550	· · · · · · · · · · · · · · · · · · ·	
		(Address)		
		iami, FL 33131		
For further informa	ation concerning this matter,	tate and Zip Code) please call:		
Grover M. Moscowit		at (<u>786</u>) <u>489-565</u>		
(Name	e of Contact Person)	(Area Code & Daytim	e Telephone Number)	
Enclosed is a check	k for the following amount n	nade payable to the Florida De	partment of State:	
 ✓ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing A	ddress	Street Address		
Amendment Section		Amendment Section		
Division of Corporations		Division of Corporations		
P.O. Box 6327		Clifton Building		
. Tallahassee, FL 32314		2661 Executive Center C	Circle	
		Tallahassee, FL 32301		

Articles of Amendment to Articles of Incorporation of

	V.		
DIDAMARVI ENT	ERPRISE	ES, INC.	SET SET
(Name of Corporation as curren	thy filed with t	he Florida Dept. of	State) AHASS
<u> </u>	62		20 E
(Document Numb	er of Corporation	on (if known)	· FRIS Z
Pursuant to the provisions of section 607.1006, following amendment(s) to its Articles of Incorporate	, Florida Statut oration:	es, this <i>Florida Pro</i>	fit Corporation adopte the
A. If amending name, enter the new name of	the corporation	<u>.</u>	P
The new name must be distinguishable and "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name association," or the abbreviation "P.A."	Inc.," or Co.,	" or the designation the word "charte	1 "Corp," "Inc," or red," "professional
B. Enter new principal office address, if appli (Principal office address MUST BE A STREET			S7 ^{TL} Avenue FC 33055
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC)	<u>E BOX</u>)	Same as a	Love
D. If amending the registered agent and/or renew registered agent and/or the new regist	ered office add	ress:	
Name of New Registered Agent:	Edwin Flo	res and Associ	ates, Inc.
New Registered Office Address:	Sl8 India (Floria	la street address)	<u>P</u> NB 449
·	Weston	(City)	, Florida 33316 (Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered a position.	agent. Si am fi	miliar with and ac	
Sig	mature of New 1	Registered Agent, if o	hanging

If amending the Officers and/or Directors, enter the title and name of each officer/director being				
(Attach additional sheets, if necessary) COO SUDDIAN ATTA OC				
(Anach additio	shai sheets, if necessary) 50.0	2 Supploat Altahod		
<u>Title</u>	Name	Address	Type of Action	
DN	Jesus Edwin Flores	1565 Sandoiper Circl	. V	
(0	TESUS CAWIN I TOLES	Ueston, Filmer Circle	Y KA AGG	
		33317	_ C Remove	
120	DI. FI	(C) C \ . (0.1)		
VV	Dalia Flores	1565 Sundpiper Cicle	Add	
		Weston, FC 35527	Remove	
			_ 🗖 Add	
			_ Remove	
		-	<u></u>	
	·			
E. If amendin	g or adding additional Articles,	enter change(s) here:		
(uttach addi	tional sheets, if necessary). (Be	specific)		
•				
				
•				
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,				
		nt if not contained in the amendment	itself:	
(if nor	applicable, indicate N/A)			
	NA NA	•		

Page 2 of 3

Th	e date of each amendment(s) adoption: April 9 , 2009
Efi	fective date if applicable: (no more than 90 days after amendment file date)
Ad	option of Amendment(s) (CHECK ONE)
M	The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
	The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
	"The number of votes cast for the amendment(s) was/were sufficient for approval
	by" (voting group)
_	The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder
	Dated 4/9/09
	Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Tesus Edwin Flores (Typed or printed name of person signing)
	Divector (Title of person gigning)

Supplement to D.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Title PD	Name Arochena, William	Address 398 W. 97L Street History FL 33010	Type of Action Add Remove
ND	Arochera, Maida	398 W. 97L Street History, FL 33010	Add Remove
<u>STO</u>	Arochena, Dinara	398W 9th Street Historia, FL 33010	Add Remove
E. If amer (anach c	nding or adding additional Articles, end additional sheets, if necessary). (Be spe		
F. If an a	mendment provides for an exchange, r	velassification, or cancellation of iss	ued shares.
provis	lons for implementing the amendment not applicable, indicate N/A)	if got contained in the amendment i	tself:
· · · · · · · · · · · · · · · · · · ·	EL uimisma 11/41)		