## PS000102889

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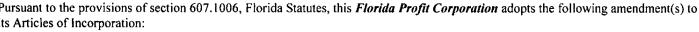
## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Division of Corporations		
NAME OF CORPORATION: AJA DIA	AMOND CORP	
DOCUMENT NUMBER: P0300010	2889	
The enclosed Articles of Amendment and fee		
Please return all correspondence concerning the	his matter to the following:	
DAVID CACE	ROS	
	Name of Contact Pers	on
ACEVEDO &	ASSOCIATES LLF	•
	Firm/ Company	
5201 BLUE L	AGOON DR, PH	
	Address	
MIAMI, FL 33	126	
	City/ State and Zip Co	de
DAVID@ACEVE	DOASSOCIATES.	СОМ
E-mail address: (to	o be used for future annual repo	rt notification)
For further information concerning this matter	, please call:	
DAVID CACEROS	at (305	, 5164276
Name of Contact Person		ode & Daytime Telephone Number
Enclosed is a check for the following amount	made payable to the Florida De	partment of State:
■ \$35 Filing Fee □\$43.75 Filing Fe Certificate of Sta		□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amer Divis Clifto 2661	et Address Indment Section Identify of Corporations In Building Executive Center Circle Industrial that the section of the sec

## **Articles of Amendment Articles of Incorporation** of

## AJA DIAMOND CORP



•	Articles of Amendment	Jan 19 .
	to Articles of Incorporation of	21/2 AUG-6 PM 2:40
AJA DIAMOND CORP		ast Con 6 PM
	ly filed with the Florida Dept. of State)	AHASSI CON
P03000102889		
(Document Numbe	r of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Floats Articles of Incorporation:	orida Statutes, this <i>Florida Profit Corporatio</i>	on adopts the following amendment(s
A. If amending name, enter the new name of th	e corporation:	
Corp., "Inc.," or Co.," or the designation "Cord "chartered," "professional association," or B. Enter new principal office address, if applications of the principal office address MUST BE A STREET A STREET A STREET A MUST NEW MAY BE A POST OFFICE (Mailing address MAY BE A POST OFFICE)  D. If amending the registered agent and/or registered agent and/or the new registered agent and	the abbreviation "P.A."  able:  ADDRESS )  BOX)  istered office address in Florida, enter the	
Name of New Registered Agent		
	(Florida street address)	···········
New Registered Office Address:	·	rida
New Registered Office Address:	·	rida (Zip Code)
New Registered Office Address:  New Registered Agent's Signature, if changing hereby accept the appointment as registered agen	(City), Flor	(Zip Code)

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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John D	<u>oe</u>	
X Remove	<u>V</u>	Mike J	<u>ones</u>	
_X Add	<u>sv</u>	Sally S	<u>mith</u>	·
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	VP		KHANIMOV, ANNETTE	11401 PINES BLVD
Add				#270
X Remove				PEMBROKE PINES FL 33026
2) Change	<del></del>			
Add				
Remove				
3 ) Change				
Add				
Remove				
4) Change		<del></del>		
Add				
Remove				
5) Change	<del></del>	_		
Add				
Remove				
0 0				
6) Change				
Add				
Remove				

	ional sheets, if nece	essary). (Be speci	fic)		
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			<del></del>		
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			•		
_	ment provides for for implementing t	he amendment if r	nssification, or car not contained in the	ncellation of issued sh he amendment itself:	ares.
<u>provisions f</u>	applicable, indicate				
provisions f	applicable, indicate				
<u>provisions f</u>	pplicable, indicate				
<u>provisions f</u>	applicable, indicate				
provisions f	applicable, indicate				
provisions f	applicable, indicate				
provisions f	applicable, indicate				
provisions f	applicable, indicate				
provisions f	applicable, indicate				

The date of each amendment(s) ac	loption:
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	roved by the shareholders through voting groups. The following statement 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)
	(voting group)
action was not required.	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder
Dated 8/1/20	the the
(By/a d	rector, president or other officer – it directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	ALVARO ACEVEDO
	(Typed or printed name of person signing)
	$\mathcal{C}\mathcal{A}$
	(Title of person signing)