

P08000054151

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Amend

01/20/12--01029--006 **43.75

FILED
2012 FEB -2 PM 2:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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✓ 00789, 00524, 00672

ASR
2/2/12



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 25, 2012

Wendy DeGirolamo
Diamond Fire Inc.
17402 Lakesedge Trail
Chagrin Falls, OH 44023

SUBJECT: DIAMOND FIRE INC.
Ref. Number: P08000054151

We have received your document for DIAMOND FIRE INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records indicate the current name of the entity is as it appears on the enclosed computer printout. Please correct the name throughout the document.

The document is incomplete. The last page of the amendment form is missing. I have enclosed a blank page four that you may fill out and return to us when you resubmit the amendment.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey
Regulatory Specialist II

Letter Number: 212A00001835

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Diamondfire Inc.
DOCUMENT NUMBER: P08000054151

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Wendy DeGirolamo

Name of Contact Person

Diamondfire Inc.

Firm/ Company

17402 LAKESEDGE Trail

Address

Chagrin Falls, Ohio 44023

City/ State and Zip Code

wendy@firecz.com

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

For further information concerning this matter, please call:

Wendy DeGirolamo at (440) 8406691
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status
enclosed) | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
(Additional Copy | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
is enclosed) |
|--|--|--|--|

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

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

Articles of Amendment
to
Articles of Incorporation
of

FILED

2012 FEB -2 PM 2:09

(Name of Corporation as currently filed with the Florida Dept. of State)

DIAMOND FIRE INC.

(Document Number of Corporation (if known))

PO 80743415
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent _____

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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:

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <u>X</u> Change ____ Add ____ Remove	<u>Pres.</u>	<u>Michael DeGirolamo</u>	<u>17402 Lakesedge Trail</u> <u>Chagrin Falls Ohio 44023</u>
2) <u>X</u> Change ____ Add ____ Remove	<u>Vice Pr</u>	<u>Wendy DeGirolamo</u>	<u>17402 Lakesedge Trail</u> <u>Chagrin Falls, Ohio 44023</u>
3) ____ Change <u>X</u> Add ____ Remove	<u>Pres.</u>	<u>Wendy DeGirolamo</u>	<u>17402 Lakesedge Trail</u> <u>Chagrin Falls, Ohio 44023</u>
4) ____ Change <u>X</u> Add ____ Remove	<u>Vice Pr</u>	<u>Michael DeGirolamo</u>	<u>17402 Lakesedge Trail</u> <u>Chagrin Falls, Ohio 44023</u>
5) ____ Change ____ Add ____ Remove	_____	_____	_____ _____ _____
6) ____ Change ____ Add ____ Remove	_____	_____	_____ _____ _____

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

The date of each amendment(s) adoption: 1-31-12

Effective date if applicable: _____

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

(CHECK ONE)

- ☒ 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 action was not required.

Dated 1-31-2012

Signature Michael P. De Girolamo

(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)

MICHAEL P. DE GIROLAMO

(Typed or printed name of person signing)

President

(Title of person signing)