P1000061175

(Requestor's Name)	ı
(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CODDOD	ATION: Diamond L	iving Corporatio	on	
	ER: P1000006117			
	f Amendment and fee are so			
Please return all corresp	ondence concerning this ma	atter to the following:		
<u> </u>	Peter A. Torres			
		Name of Contact Perso	n	
[Diamond Living (Corporation	•	
-		Firm/ Company		
8	3297 Champions	Gate Blvd. Suit	e 319	
_		Address		
(Champions Gate	, FL 33896		
-		City/ State and Zip Cod	e	
dian	nondlivingpt@gn	nail com		
Gian		sed for future annual report	notification)	
	2 man address. (to be a	sea for factive annual report	notification)	
For further information	concerning this matter, plea	se call:		
Peter A. Torre	s	at (407	448-2706	
Name of	Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for t	the following amount made	payable to the Florida Depa	artment 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)	
<u>Mailir</u>	ng Address	Street	Address	
Amendment Section		Amendment Section		
Division of Corporations		Division of Corporations		
P.O. Box 6327 Clifton Building				
Tallah	assee, FL 32314		xecutive Center Circle	
		i ailana	ssee, FL 32301	

Articles of Amendment to

TALLAPA 16 PM 1:16 Articles of Incorporation **Diamond Living Corporation** (Name of Corporation as currently filed with the Florida Dept. of State) P10000061175 (Document Number of Corporation (if known)

ment(s) to

its Articles of Incorporation:				
A. If amending name, enter the new name of the	he corporation:			
				The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Gword "chartered," "professional association," or	Corp," "Inc," or "Co	". A profession	· "incorporated" o al corporation nam	r the abbreviation e must contain the
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET				<u> </u>
				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	F ROY)			
(Francis address MAT BEATOST OFFICE	<u>. BOX</u>)			
·			······································	
D. If amending the registered agent and/or reg new registered agent and/or the new register		s in Florida, ente	er the name of the	
	_	i		
Name of New Registered Agent				
	(Florida street	address)	· ^	
Non-Braintenad Office Address	(1 tornus sirees	uuui esay	F1 11	
New Registered Office Address:	(City)		, Florida(Zip C	ode)
New Registered Agent's Signature, if changing	Dogistared Agents			
I hereby accept the appointment as registered age	nt. I am familiar witi	h and accept the c	obligations of the po	sition.
Signature o	of New Registered Age	nt 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: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	D	James C. Duffey	499 Chelsea Avenue Davenport, FL 33837
2) Change Add Remove	D	John N. Bradley	521 Chelsea Avenue Davenport, FL 33837
3) Change Add Remove			
4) Change Add Remove	 		
5) Change Add Remove		- . 	
6) Change Add Remove			

If amending or adding additional Artication and Artication additional sheets, if necessary).	(Be specific)
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f an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:

The date of each amendment	t(s) adoption: 04/13/2012
Effective date <u>if applicable</u> :	04/13/2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
☐ The amendment(s) was/wer must be separately provide	re approved by the shareholders through voting groups. The following statement ad 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)
action was not required.	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder
action was not required.	
se	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Peter A. Torres
	(Typed or printed name of person signing)
	President
	(Title of person signing)