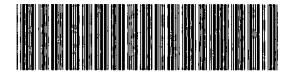
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF	CORPOR	ATION: D&IFINAL	NCIAL SERVICI	ES, CORP.
		_{ER:} P1200007224		
		f Amendment and fee are su		
Please return	all corresp	ondence concerning this ma	tter to the following:	
	(CLAUDIA MONC	ARZ	
	-	TOSOLINI & LAN	Name of Contact Person	ח
	4	407 LINCOLN RE	Firm/ Company D, STE 11-C	
	<u></u>	MIAMI BEACH, F	Address LORIDA, 33139)
	clau	dia.moncarz@blt	City/ State and Zip Cod	e
			ed for future annual report	notification)
For further ir	nformation	concerning this matter, pleas	e call:	
CLAUD	IA MC	NCARZ	at (305	, 534 0420
Name of Contact Person			de & Daytime Telephone Number	
Enclosed is a	check for	the following amount made p	payable to the Florida Depa	artment of State:
■ \$35 Filin	ng 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)
•	Amer Divis P.O. 1	ng Address Idment Section Idment Sec	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment Articles of Incorporation

D & I FINANCIAL SERVICES, CORP.

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(Document Numb	per of Corporation (if I	(nown)	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
suant to the provisions of section 607.1006, Farticles of Incorporation:	lorida Statutes, this F	orida Profit Corporation ad	dopts the following an
If amending name, enter the new name of t	he corporation:		
			The
ne must be distinguishable and contain the orp.," "Inc.," or Co.," or the designation "(d "chartered," "professional association," o	Corp," "Inc," or "C	o". A professional corpord	orated" or the abbre ation name must cont
Enter new principal office address, if application of the second of the			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E BOX)		
	<u> </u>		
			· · · · · · · · · · · · · · · · · · ·
			,
If amending the registered agent and/or re- new registered agent and/or the new regist		ss in Florida, enter the nar	ne of the
new registered agent and/or the new regist	ered office address;		
Name of New Registered Agent			
	/F1 + I		
	(Florida stree	i aaaress)	
New Registered Office Address:	(City)	, Florida	(Zip Code)
	(City)		(Zip Code)
v Registered Agent's Signature, if changing		at and account the attract	
reby accept the appointment as registered ag	eni. I am familiar wi	in ana accepi the obligation	is of the position.
Cir	of Nov Dont-to 1 4	rout if ah awair-	
Signature	of New Registered Ag	eni, ij 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 <math>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	PT John	Doe		
X Remove	<u>V</u> <u>Mike</u>	Mike Jones		
X Add	<u>SV</u> Sally	<u>/ Smith</u>		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) Change	PD	KOZLOVSKA, TATYANA	1031 LINCOLN ST	
Add			HOLLYWOOD	
X Remove			FL, 33019	
2) Change	PTD	IADISERNIA, GIUSEPPE	407 LINCOLN RD, STE 11-0	
$\frac{X}{X}$ Add			MIAMI BEACH	
Remove			FL, 33139	
3) X Change	SD	DIAZ, FRANCISCO A	1031 LINCOLN ST	
Add			HOLLYWOOD	
Remove			FL, 33019	
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

nge, reclassification, or cancellation of issued shares,
ment if not contained in the amendment itself:
RE:
99% (ninety nine percent)
(one percent)

The date of each amendment(s) adoption: June 4, 2013			
Effective date if applicable:			
	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
■ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.		
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):		
"The number of votes ca	st for the amendment(s) was/were sufficient for approval		
by	(voting group)		
☐ The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder		
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder		
Dated 6 -	6.2013.		
selec	director, president or other officer—if directors profficers have not been sted, by an incorporator—if in the hands of a receiver, trustee, or other court printed fiduciary by that fiduciary)		
	GIUSEPPE IADISERNIA		
	(Typed or printed name of person signing)		
	Director		
	(Title of person signing)		