P16600078619

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	SAIDA :NOIT	CONSTANT	INC
DOCUMENT NUMBER: P16000078619			
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this mat	tter to the following:	
Louis DIAZ			
_	Name of Contact Person		
<u></u>		Firm/ Company	
	10904 SV	J 119 St	
		Address	
	many	City/ State and Zip Code	<u>, </u>
an	ilou3@ and E-mail address: (to be the	ed for future annual report	
For further information of	concerning this matter, pleas	e call:	
Louis J	JAZ	at (305	934~9173 de & Daytime Telephone Number
	Contact Person		•
Enclosed is a check for t	he following amount made p	payable to the Florida Depa	runent 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)
Mailie	na Address	Street	Address

Mailing Address

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

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

Articles of Amendment to

Articles of Incorporation

	of		
ADIAZ CON	SULTANI,	INC.	
P160000786	of Corporation as currently f	ned with the Florida Dept	<u>. oi State</u>)
1 100000100	(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Florida	orida Profit Corporation ad	opts the following amendment(s) t
A. If amending name, enter the new na	me of the corporation:		
DIFFO SAIGH	E Maniage	EMENT,]	INC. The new
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the designa- word "chartered," "professional associat	ation "Corp," "Inc," or "Co	". A professional corpora	
B. Enter new principal office address, i (Principal office address MUST BE A ST		same as	CURRENT S
			SSE
C. Enter new mailing address, if applie (Mailing address MAY BE A POST C		Same as	current
D. If amending the registered agent am new registered agent and/or the new		s in Florida, enter the nam	e of the
Name of New Registered Agent	Same as	current	
	(Florida street	address)	
New Registered Office Address:	(C	, iry)	Florida(Zip Code)
	(0.	,,	(Lap Gode)
New Registered Agent's Signature, if ch I hereby accept the appointment as registe		h and accept the obligations	of the position.
 	Signature of New Reg	istered 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.

X Change	PT John Doe	
X Remove	V Mike Jones	
_X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> Name	<u>Addres</u> s
1) Change		
Add	$1/\overline{2}$,	
Remove	13,36	
2) Change		
Add	9,5	
Remove		
3) Change		······································
Add		
Remove	Wy X	
4) Change		
Add		\ <u></u>
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
10/	
If an amendment provides for an exchange, reclassification, or cancellation of i	ssued shares,
provisions for implementing the amendment if not contained in the amendmen (if not applicable, indicate N/A)	ıt itself;

The date of each amendment(s) adoption:, if other than the date this document was signed.
Effective date if applicable: (no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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 Ana Diaz (voting group)
(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
(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)
$\frac{A \omega a \mathcal{D}_{1}AZ}{\text{(Typed or printed name of person signing)}}$
President
(Title of person signing)