

P17 0000 37659

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

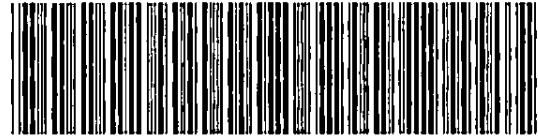
(Business Entity Name)

(Document Number)

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R. WE. T.
JAN 05 2021

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: D'JHOMARI INC

DOCUMENT NUMBER: P17000037659

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

Please return all correspondence concerning this matter to the following:

RAUL PEREZ
Name of Contact Person
INTERNATIONALE FINANCIAL CORP
Firm/ Company
6115 STIRLING RD STE 212
Address
DAVIE , FL 33314
City/ State and Zip Code
INTLEFINCORP@AOL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RAUL PEREZ at (954) 609-9604
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:

- \$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)

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

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

DJHOMARI INC

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

P17000037659

(Document Number of Corporation (if known))

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**)

6115 STIRLING ROAD STE 212

DAVIE, FL 33314

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

6115 STIRLING ROAD STE 212

DAVIE, FL 33314

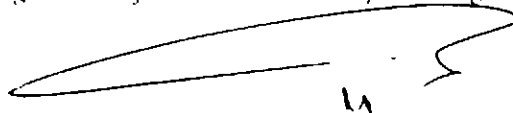
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent INTERNATIONALE FINANCIAL CORP
6115 STIRLING ROAD STE 212
(Florida street address)

New Registered Office Address: DAVIE, Florida 33314
(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

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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:

Change PT John Doe

Remove V Mike Jones

Add SV Sally Smith

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	<u>P</u>	<u>CESAR M ALBERTO POSADA</u>	<u>4683 BLAZER TR</u>
<input type="checkbox"/> Add			<u>DAVIE, FL 33314</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input checked="" type="checkbox"/> Remove			<u>2820 NE 49TH ST</u>
3) <input type="checkbox"/> Change	<u>T</u>	<u>ALDO ALBERTO POSADA</u>	
<input type="checkbox"/> Add			<u>FORT LAUDERDALE, FL 33308</u>
<input type="checkbox"/> Remove			
4) <input checked="" type="checkbox"/> Change	<u>P</u>	<u>PEDRO GOMEZ</u>	<u>12701 SW 14TH ST</u>
<input type="checkbox"/> Add			<u>PEMBROKE PINES, FL 33027</u>
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

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

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

MR. PEDRO GOMEZ IS THE INCORPORATOR AND ONLY OWNER OF THIS CORPORATION

NO OTHER PERSON OR ENTITY HAVE THE AUTHORITY TO ADD, CHANGE OR REMOVE

ANY PERSON OR ARTICLES OF AMENDMENTS TO THIS CORPORATION UNLESS AUTHORIZED

BY PEDRO GOMEZ IN WRITTING AND DULLY NOTIRIZED DOCUMENT.

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)

11/12/2020

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)

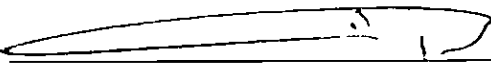
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) **(CHECK ONE)**

- The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- 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)

11/12/2020
Dated _____

Signature  _____

(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)

RAUL PEREZ

(Typed or printed name of person signing)

POA

(Title of person signing)