P110000041868

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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: DILIU INC DOCUMENT NUMBER: P17000047868 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: PEDRO H RIVERA Name of Contact Person DILIU INC Firm/ Company 4260 DESTE CT APT 206 Address LAKE WORTH, FL 33467 City/ State and Zip Code PEDROHRIVERA@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: PEDRO H RIVERA at (925) 325-2410

Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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

	Articles of A	nendment	/A
	to Articles of Inc	orporation	10/2 /
	of	F	San San Contraction
DILIU INC			
(<u>Name</u>	of Corporation as currentl	filed with the Florida Dept. of St	ate)
P17000047868			
	(Document Number of	Corporation (if known)	637
Pursuant to the provisions of section 607 as Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation adopts the	ne following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
			The new
ame must be distinguishable and con Corp.," "Inc.," or Co.," or the design ord "chartered," "professional associa	nation "Corp," "Inc," or "	Co". A professional corporation n	or the abbreviation ame must contain the
	B. Enter new principal_office address, if applicable:		
Principal office address <u>MUST BE A S</u>	TREET ADDRESS)	LAKE WORTH, FL 33467	
C. Enter new mailing address, if appl	icable:		
		SAME AS ABOVE	
(Mailing address <u>MAY BE A POST</u>			
(Mailing address <u>MAY BE A POST</u>			
(Mailing address <u>MAY BE A POST</u>			
(Mailing address <u>MAY BE A POST</u>			
. If amending the registered agent an			<u>ne</u>
). If amending the registered agent an new registered agent and/or the new			n <u>e</u>
. If amending the registered agent an	w registered of fice address		<u>ne</u>
). If amending the registered agent an new registered agent and/or the new	w registered of fice address 4260 DESTE CT APT 206		<u>ne</u>
). If amending the registered agent an new registered agent and/or the new	4260 DESTE CT APT 206	et address)	22467
. If amending the registered agent an new registered agent and/or the new	w registered of fice address 4260 DESTE CT APT 206 (Florida stre		22467

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	PT	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) X Change	VP	JUAN D RIVERA	3212 GREY LEAF DR
Add			WILMINGTON, NC 28409
Remove			
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			···
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

date this document was signed.	deption:, if other the	in th
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this date will not be listed appartment of State's records.	as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statement 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)	
	(voting group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
04/23/2018		
Dated(Signature	Pedro Riveral.	
(By a disselected	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	PEDRO H RIVERA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	