P17000065038

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION:	CORP			
DOCUMENT NUMBER: P17000065038					
	e of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	Andrea Hollingsworth				
	· 	Name of Contact Person			
	Viglione Accounting Corp				
		Firm/ Company	· -		
	7061 S Tamiami Trl Suite 20	4			
		Address			
	Sarasota, FL 34231				
		City/ State and Zip Code			
	aviglione@me.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati	on concerning this matter, please	se call:			
Andrea Hollingsworth		941 at (
Name of Contact Person		Area Code & Daytime Telephone Number			
Enclosed is a check t	or the following amount made	payable to the Florida Depa	rtment of State:		
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 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

DIOSVIENE TILE CORP

DIOSVILINI, FIEL CORI		
(Name of Corporation as currently filed with the Florid	la Dept. of State)	
217000065038		
(Document Number of Corporation (if know	n)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corpora</i> is Articles of Incorporation:	ution adopts the following an	nendment(s)
A. If amending name, enter the new name of the corporation:	T.	
name must be distinguishable and contain the word "corporation," "company," or "incorpor "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corpord "chartered," "professional association," or the abbreviation "P.A."	rated" or the abbreviation "	
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)		
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	,	
D. If amending the registered agent and/or registered office address in Florida, enter new registered agent and/or the new registered office address: Name of New Registered Agent		 -
(Florida street address)		
New Registered Office Address:	, Florida	
(City)	(Zip Code	ij
New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obt	ligations of the position	
печену ассерь те арранитей из гезамегей адет. Тат запаша жин ани ассерь те ога	igations of the positions	
Signature of New Registered Agent, if cha		 D:
Check if applicable	~ ଫୁ	
The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.	ر: پ)

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: \underline{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)	Title	Name	<u>Addres</u> s	
1) X Change	P	Rafael Rivera Solorio	3715 14th St W Lot 7	
Add			Bradenton, FL 34205	
Remove				
2) Change	P	Adriana Ibarra Mendoza	3715 14th St W Lot 7	
Add			Bradenton, FL 34205	
X Remove				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change			· · · · · · · · · · · · · · · · · · ·	
Add				
Remove				
6) Change				
Add				
Remove				

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)	<u>If amending or addi</u> Attach <i>additional she</i>	ets, if necessary).	(Be specific)	.			
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	(if not applicabl	e, indicale (N/A)					
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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)	ile date)
	is block does not meet the applicable statutory filing reque Department of State's records.	nirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors withou	t shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for sufficient for approval.	r the amendment(s)
	approved by the shareholders through voting groups. The for each voting group entitled to vote separately on the an	
"The number of votes	east for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
June 18 Dated	, 2021	
sel	a director, president or other officer – if directors or office ected, by an incorporator – if in the hands of a receiver, tru pointed fiduciary by that fiduciary)	ers have not been
	Rafael Rivera Solorio	
	(Typed or printed name of person signing)	
	Vice President	
	(Title of person signing)	