P170000 97312

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	DIAMOND	BACK INTERN	ATTOWAZ , INC.
DOCUMENT NUMBER:	P17	0000 97312	-
The enclosed Articles of Amenda			
Please return all correspondence of	concerning this ma	tter to the following:	
	(A) G. H. (I)	RESTURI	_
 -	JIV O KI D	Name of Contact Perso	n
		Firm/ Company	
/3	21 AL	TON R.D. #	55-1
			33/39
		City/ State and Zip Coc	le
		sed for future annual report	notification)
For further information concerning	g this matter, pleas	se call:	
DARNIN DI	IVENT	at (305	de & Daytime Telephone Number
Enclosed is a check for the follow			
 	_	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	_
Mailing Addre Amendment Se Division of Cor P.O. Box 6327 Tallahassec, Fl	ction porations	Ameno Divisio Cliftor	Address Imment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

DIAMONDBACK INTON.	NATIONAL INC	
(Name of Corporation as currently	filed with the riorida Dept. of State)	
P/70000 973/2		
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the fe	ollowing amendment(s) to
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	Lo". A professional corporation name	the abbreviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	1200 Brichell Ave	
	suite 1800 Niami, FL 3.3131	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		<u>····································</u>
		30 FILE
D. If amending the registered agent and/or registered office addr	ess in Florida, enter the name of the	AH III OS
new registered agent and/or the new registered office address:		
Name of New Registered Agent		
		·
(Florida stre	et address)	
New Registered Office Address:	. Florida	
	City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w		sitian
t nervoy accept the appointment as registered agent. I am juntitud in	ma and decept the vongations of the por	
Signature of New Re	egistered 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.

Example: X Change	<u>PT</u> John D	<u>oe</u>	
X Remove	<u>V</u> <u>Mike Jo</u>	<u>ones</u>	
X Add	<u>SV</u> <u>Sally S</u>	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	CEO	WILLIAM ENG	1830 RADIUS DR #225
Add			HOLLY WOOD, FL 33020
Remove			
2) Change	CSC	BRIAN FISHER	Met Ling DR 97068
Add Remove			West dunn, UR 7+U68
3) V Change	<u>COO</u>	BERTLING INGRID	
Add			
Remove			
4) V Change	PRESIDENT	DLIVENT CHADWICK	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
_ Remove			

amending or adding additional Articular Articular additional sheets, if necessary).	(Be specific)
an amendment provides for an exch	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	adment if not contained in the amendment risers.

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 document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	nt(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	lder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 11-77-794 D	
(By a director, president or other officer - it directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other co	ourt
appointed fiduciary by that fiduciary)	
D CHAD WI (K OLIVENT (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
PRESIDENT (Title of person signing)	
(Title of person signing)	