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Amend

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: BUE Diamond Francis INC.						
DOCUMENT NUMBER: 71800007535						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Adalberto Otto Crut Name of Contact Person						
Blue dicumonal Iraning the.						
Firm/ Company						
1.0. box 423131 Address						
Kissimmoe F(. 34742						
City/ State and Zip Code						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Siver of Contact Person at (407) 3(d-13) 6.  Area Code & Daytime Telephone Number						
Enclosed is a check for the following amount made payable to the Florida Department of State:						
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Mailing Address Street 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** Articles of Incorporation of

	to	
	Incorporation of	1
·		
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)	41
Dire Dicumenal Francis	NS THE.	
(Document Number	of Corporation (if known)	<del></del>
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s	s) to
A. If amending name, enter the new name of the corporation:		
	The new	
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	tion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the	
B. Enter new principal office address, if applicable:	905 Lenore aue.	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	57. cloud Fe. 34769.	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. BOY 423/31	
	GHENE ID summizerit	
	<del></del>	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address		
Name of New Registered Agent Deveto	o Octiz Clut	
905 10 mg	e are.	
(Florida si	street address)	
New Registered Office Address: 57. Clad	(City), Florida 3 (7) (City).	
	(2.9)	
New Registered Agent's Signature, if changing Registered Agen		
I hereby accept the appointment as registered agent. I am familiar	r with and accept the obligations of the position.	
ALA:	A)	
Simulation of November	Periotored Agent if changing	
Signature of New .	Registered 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	PT John I	<u>Doe</u>	
X Remove	V Mike	Jones .	
X Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>P</u>	Brittary A	1815 Ole Heitere Pr. 40711700 Onlaw Do, Ep. 32835.
Add Remove		1-(UCOICC)	Oldobo, Q. 32837.
2) Change	2	Adalbatto Oritz Cruz	905 lenore aur. ST. claud Fr. 34409.
Remove			
3) Change Add			
Remove			
4) Change			
Add Remove			
5) Change			
Add			
Remove			
6) Change			<del></del>
Add			· · · · · · · · · · · · · · · · · · ·
Remove			

<u>lf amending or ad</u> Attach <i>additional s</i>	i <mark>ding ad</mark> sheets, if	<u>attional Art</u> (necessary).	icies, enter ( Be specif	cnange(s) he lic)	<u>re</u> :					
Rease	Ve.	mue	Beit	tems	an	6	add	7		
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f an amendment	provide	s for an excl	hange, recla	ssification, o	r cancell	ation of	issued sha	res,		
provisions for im (if not applied	plement able. ind	ting the ame licate N/A)	endment if n	ot contained	in the a	mendme	nt itself:			
(3	,	,								
		<u>.</u>				-	· · · · · ·			

	, if other than the
date this document was signed.	
Effective date if applicable: 05 05 06 8.	
(no more than 90 days	after amendment file date)
Note: If the date inserted in this block does not meet the applicable st document's effective date on the Department of State's records.	atutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
[ The amendment(s) was/were adopted by the shareholders. The number by the shareholders was/were sufficient for approval.	er of votes cast for the amendment(s)
- The amendment(s) was/were approved by the shareholders through vo must be separately provided for each voting group entitled to vote separately	
"The number of votes cast for the amendment(s) was/were suffic	ient for approval
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors withou action was not required.	t shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without sha action was not required.	reholder action and shareholder
Dated 05 05 2018.	
Signature Brothery Malone	
(By a director, president or other officer – if	directors or officers have not been
selected, by an incorporator - if in the hands	
appointed fiduciary by that fiduciary)	
Brittany Mal	
(Typed or printed name or	
(Title of person	dent
(Title of perso	n signing)