P1800002299

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPORATION: Diversified Globa	d Realty Circup
DOCUMENT NUMBER: P18000022929	
The enclosed Articles of Amendment and fee are si	ubmitted for filing.
Please return all correspondence concerning this ma	atter to the following:
Judy Caklwell	
Diversified Global Realty In	
8613 Old Kings Rd South, U	Firm/ Company Unit 402-4
lucksonville 43-32217	Address
judyacałdwellia/yalioo.com	City/ State and Zip Code sed for future annual report notification) se call:
Judy Caldwell	ar ()0-1
Name of Contact Person	Area Code & Daytime Lelephone Number
Enclosed is a check for the following amount made p	payable to the Florida Department of State:
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (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 Clifton Building 2661 Executive Center Circle Fallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation	on as currently filed with the Flor	ida Dept. of State)
P18000022929		
(Docum	ent Number of Corporation (if know	vn)
Pursuant to the provisions of section 607.1006, Florida ts Articles of Incorporation:	Statutes, this Florida Profit Corpo	ration adopts the following amendment(s) to
A. If amending name, enter the new name of the co	rporation:	
		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the o	" "Inc," or "Co". A professional	"incorporated" or the abbreviation corporation name must contain the
3. Enter new principal office address, if applicable		
Principal office address <u>MUST BE A STREET ADD</u>	<u>RESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	v)	
	<u> </u>	
). If amending the registered agent and/or register	ed office address in Florida, enter	the name of the
new registered agent and/or the new registered of	office address:	
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		Florida
	(Ciņ)	(Zip Code)
New Registered Agent's Signature, if changing Reg		
Thereby accept the appointment as registered agent.	<u>istered Agent:</u> Lam familiar with and accounts were	
Λ	www.parme.ung	guarons of the position.

<u>.</u>

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 Do	<u>)e</u>		
X Remove	<u>V</u>	Mike Jones			
X Add	<u>sv</u>	Sally Sr	n <u>ith</u>		
Type of Action (Check One)	Title		Name	Address	
1) Change		_			
Add					
Remove					
2) Change		_			
Add					
Remove					
3) Change		_			
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change		_			
Add					
Remove					
6) Change		_			
Add					
Remove					

Attach additional sheets, if necessary).	icles, enter change(s) her (Be specific)		
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	<u> </u>		a aa7
f an amendment provides for an excl provisions for implementing the ame	ange, reclassification, or	cancellation of issue	d shares,
(if not applicable, indicate N/A)	nument ii not containeu	in the amendment its	<u>eir:</u>
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The date of each amendment(s) adoption date this document was signed.	if other than the
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this block de document's effective date on the Department	ies not meet the applicable statutory filing requirements, this date will not be listed as the it of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes cast for the amendment(s) for approval.
The amendment(s) was/were approved by must be separately provided for each vi	y the shareholders through voting groups. The following statement uting group entitled to vote separately on the amendmentiss:
"The number of votes east for the	amendment(s) was/were sufficient for approval
by	and the same and t
	(voting group)
☐ The amendment(s) was/were adopted by action was not required.	the board of directors without shareholder action and shareholder
The amendment(s) was/were adopted by action was not required.	the incorporators without shareholder action and shareholder
March 27, 2018	
selected, by in	president or other officer—if directors or officers have not been incorporator—if in the hands of a receiver, trustee, or other court ciary by that fiduciary)
Judy C	aldwell
	(Typed or printed name of person signing)
CLO a	nd Incorporator
	(Title of person signing)