8/6/2018



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : LENSUR CORP Account Number : I20180000038 Phone : (305)364-8824 Fax Number : (305)456-2910

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:___

COR AMND/RESTATE/CORRECT OR O/D RESIGN DICHA MINING CORP

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Tallahassee, FL 32314

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: DICHA MINING CORP P18000058831 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **NELSON ODELLA** Name of Contact Person PRESIDENT Firm/ Company 6187 NW 167 ST STE H40 Address MIAMI, FL 33015 City/ State and Zip Code lensur-accounting@live.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305) 3648824 Area Code & Daytime Telephone Number **NELSON ODELLA** Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & ☐\$52.50 Filing Fcc S43.75 Filing Fee & □ \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

DICHA MINING CORP		
(Name of Corpora	ation as currently filed with the Florida Dept.	of State)
P18000058831		
(Doc	ument Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Flor its Articles of Incorporation:	ida Statutes, this Florida Profit Corporation ad	opts the following amendment(s) to
A. If amending name, enter the new name of the	corporation:	
		The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or the	rp," "Inc," or "Co". A professional corpora	rated" or the abbreviation
B. Enter new principal office address, if applical	<u></u>	1-4-
(Principal office address MUST BE A STREET A	DDRESS)	
	.	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	BOX	
(maning duniess <u>marrials</u>		
		
		, ,
D. If amending the registered agent and/or regis	itered office address in Florida, enter the nam	ne of the
new registered agent and/or the new registere	ed office address:	
Name of New Registered Agent		
	(Florida street address)	·
N. B. (1998, 417, 1999)		. Florida
New Registered Office Address:	(Cuy)	(Zip Code)
New Registered Agent's Signature, if changing F	Registered Agent:	a af the position
I hereby accept the appointment as registered agen	т. — 1 ат јатинаг wun ала ассері те оонушнот	>- D2
		AH AH T
Si	ignature of New Registered Agent, if changing	SSEC

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 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>	Address
1) Change	М	LENSUR CORP	6187 NW 167 ST STE H40
X Add			MIAMI, FL 33015
Remove			
2) Change		_	
Add			
Remove			
3) Change			
Add			<u></u>
Remove			
4) Change			
Add			
Remove			- 140/
5) Change			
Add			
Remove			
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Add			
Remove			

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samendment provides for an exch	nange, reclassifi	cation, or cancell	ation of issued share	
visions for implementing the ame	ndment if not co	ntained in the a	mendment itself:	
(if not applicable, indicate N/A)				
		<u> </u>		
			.	
	<u> </u>			 .
• • • • • • • • • • • • • • • • • • • •				
				_

	08/06/2018	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
	3/06/2018	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment sufficient for approval.	(s)
	pproved by the shareholders through voting groups. The following statem or each voting group entitled to vote separately on the amendment(s):	ient
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	,"	
-,	(voting group)	
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and sharehold	ler
The amendment(s) was/were a	dopted by the incorporators without shareholder action and shareholder	
action was not required.	dopied u,	
08/06/20)18	
Dated	- Mariano	
/ \	Madeir	
Signature		
	director, president or other officer - if directors or officers have not been	
	ted, by an incorporator - if in the hands of a receiver, trustee, or other cou	irt
applo	inted fiduciary by that fiduciary)	
, electrical designation of the second	NELSON ODELLA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	