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DIAMOND RETAIL ENTERPRISES, INC.

TYPE OF FILING: AMENDMENT

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AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: Diamond Retail Enterp	onses, inc.	<u> </u>	
DOCUMENT NUM	BER:			
The enclosed Articles	of Amendment and fee are so	abmitted for filing.		
Please return all corre	spondence concerning this ma	itter to the following:		
	Kim Mitchell			
		Name of Contact Pers	son	
	Diamond Retail Enterprises, Inc.			
		Firm/ Company	_	
	33928 Lone Oak Drive	, ,		
		Address		
	Estero, FL 33928			
	· · · · ·	City/ State and Zip Co	ode	
		·		
kimjmi ———	tchell@yshoo.com	sed for future annual repo		
For further information	n concerning this matter, plea	se call:	·	
Kim Mitchell		at (788-6322	
Name	of Contact Person	Area (Code & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made	payable to the Florida De	partment of State:	
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 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 Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation	on as currently filed with the Flor	rida Dept. of State)	
P109			
(Docum	nent Number of Corporation (if kno	wn)	
Pursuant to the provisions of section 607.1006, Florida ts Articles of Incorporation:	statutes, this Florida Profit Corpo	oration adopts the follow	ing amendment(s)
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 co	" "Inc," or "Co". A professiona	"incorporated" or the l corporation name mus	abbreviation
Enter new principal office address, if applicable		<u>.</u>	70
Principal office address <u>MUST BE A STREET ADD</u>	RESS)	-	9.
		<u>-</u> .	
			·
Enter new mailing address, if applicable:			 -
(Mailing address MAY BE A POST OFFICE BO)	<u></u>		NH 9: (
		_	
			-
If amonding the westerned speed and and	- A - 691 A - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -		
 If amending the registered agent and/or registered new registered agent and/or the new registered of 	ed office address in Piorida, enter office address:	the name of the	
Manne of Mann Panintagad Anger			
Name of New Registered Agent	- · · · · · · · · · · · · · · · · · · ·		_
Name of New Registered Agent	(Florida street address)		- -
	(Florida street address)		_
Name of New Registered Agent New Registered Office Address:	(Florida street address)	, Florida	p Code)

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	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change	VP	Yosef Bitton	1815 NE 144th Street
Add X Remove			North Miami Beach, FL 33181
2) Change			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			· · · · · · · · · · · · · · · · · · ·
Add			
Remove			
6) Change			
Add			
Remove			

mending or adding additional , tach additional sheets, if necessar	ry). (Be specifi	c)			
					
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n amendment provides for an e	exchange, reclas	sification, or ca	ncellation of iss	ued shares.	
ovisions for implementing the a (if not applicable, indicate N/A	<u>imendment if no</u>	t contained in t	he amendment	ltself:	
(ij not applicable, indicale ivix	,				
				•	
<u> </u>					
··			_		

The date of each amendment(s) adoption:, if other than t date this document was signed.
Effective date if applicable: May 1, 2019
(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 date will not be listed as a document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"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.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated_May 14, 2019
Signature Am mutchen
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator — If in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Kim Mitchell
(Typed or printed name of person signing)
President
(Title of person signing)