P190000 93869

(Re	equestor's Name)			
(0.1	I.I			
(Ad	ldress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	ısiness Entity Nar	ne)		
(Do	cument Number)			
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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Call. 25 Pt 1:11

R WHITE JUN 11 2020

COVER LETTER

TO: Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPOR	ation: KJL er: P19,000	GENERAL S 193869	ERVICES INC		
	f Amendment and fee are su				
Please return all correst	ondence concerning this ma	ter to the following:			
, , , , , , , , , , , , , , , , , , , ,		-			
_	4	Name of Contact Persor	1		
	RS ACCOUN	D'NG AND THE	SOLULUE.		
-		Firm/ Company			
	1700 BAN	KS Road	Solvine. Suife soc		
-		Address			
	MANSate	K 33	3 <i>063</i>		
-		City/ State and Zip Code	e		
-	F-mail address: (to be us	ed for future annual report	notification)		
			,		
For further information	concerning this matter, pleas	se call:			
	<i>i</i>				
Loons	SILVA	at (4.14	de & Daytime Telephone Number		
Name o	f Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mail	ing Address	Street	Address		
Amendment Section Amendment Section					
Division of Corporations Division of Corporations					

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment

to
Articles of Incorporation
of

to

KJL GOVORAL	Strucks Zic25 "1:11
(Name of Corporation as currently f	iled with the Florida Dept. of State)
P19100009357	39
(Document Number of C	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Flaits Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	O /
DIAMOND CONC.	NETE POLISH INC The new
name must be distinguishable and contain the word "corporation," "con" "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A particle of the containing of the abbreviation "P.A."	npany," or "incorporated" or the abbreviation "Corp.," —
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent	
(Florida street	address)
V . n . ' 1700 (11)	Florida
New Registered Office Address: (C	ity)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wit	h and accept the obligations of the position.
	-
Signature of New Reg.	istered Agent, if changing
• • •	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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 = Trustec; C = Chairman or Clerk; CE() = 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.

X Change	<u>PT</u>	John Do	<u>e</u>		
X Remove	<u>V</u>	Mike Jo	<u>nes</u>		
X Add	<u>\$V</u>	Sally Sn	nith		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		<u>Addres</u> s
1) Change		_		·-·	
Add					
Remove					
2) Change		_			
Add					
Remove 3) Change					
Add					
Remove					
4) Change					
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Remove					<u>.</u>
5) Change		_			
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Remove					
6) Change		_			
Add					
Remove					

ch additional sheet	<u>additional Articles, ente</u> s, if necessary). (Be spec	cific)			
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visions for impler	vides for an exchange, rec nenting the amendment i	classification, or can- if not contained in th	<u>e amendment itsel</u>	<u>fi</u>	
(if not applicable,	indicate N/A)				
				.	
					
. <u>.</u>				<u>-</u>	
1,				-1-12	
				 =	

The date of each amendment(s) a	doption:	, 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 bedocument's effective date on the D	block does not meet the applicable statutory filing requirements, this epartment of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adaction was not required.	opted by the incorporators, or board of directors without shareholder	action and shareholder
by the shareholders was/were ad	opted by the shareholders. The number of votes east for the amendmentificient for approval.	nent(s)
	proved by the shareholders through voting groups. The following start each voting group entitled to vote separately on the amendment(s):	itement
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
bv	<u> </u>	
• ——-	(voting group)	
Dated	05/18/2020	
Signature	irector, president or other officer - if directors or officers have not b	een
selecte	d, by an incorporator - if in the hands of a receiver, trustee, or other	court
appoir	ted fiduciary by that fiduciary)	
	BRUNA Mello Jose	
	(Typed or printed name of person signing)	
	PASIDORT	
	(Title of person signing)	