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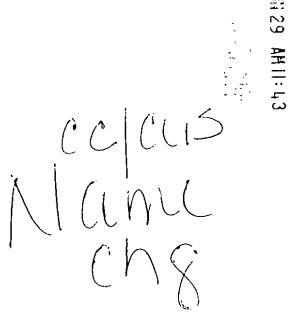
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JUL 24 2021 LALBRITTON

## **COVER LETTER**

TO: Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

AME OF CORPORATION: VT Diamond Inc.					
OCUMENT NUMBER: P2100045082					
he enclosed Articles of Amendment and fee are submitted for filing.					
lease return all correspondence concerning this matter to the following:					
Name of Contact Person  VI Dianiond Inc.  Firm/ Company  Co239 Cartmel Lane  Address  Wintermere, FL 34780  City/ State and Zip Code					
E-mail address: (to be used for future annual report notification)					
or further information concerning this matter, please call:					
Darshana Desai at (409) 454 - 4529  Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
S35 Filing Fee					
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee					

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

VI Diamond Inc.	A with the Claride Dent of State		<del></del>
(Name of Corporation as currently fil	ed with the Fiorida Dept. of State	<u>e)</u>	
(Document Number of Co	rporation (if known)		
		following amend	dment(s) to
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flor</i> its Articles of Incorporation:	tau i roju corporumon acopio inc		
A. If amending name, enter the new name of the corporation:			
VT Diamonds Inc.			пеш
name must be distinguishable and contain the word "corporation," "comp" "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A pr" "chartered," "professional association," or the abbreviation "P.A."	oany," or "incorporated" or the ab ofessional corporation name mus	obreviation "Cor st contain the w	p.," vord
B. Enter new principal office address, if applicable:	NIA		_
(Principal office address MUST BE A STREET ADDRESS)		_	
<del>-</del>		1021	—
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C. Enter new mailing address, if applicable:	NIA		
(Mailing address MAY BE A POST OFFICE BOX)		13: Z	777
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-		ည်	
D. If amending the registered agent and/or registered office address	in Florida, enter the name of the	•	
new registered agent and/or the new registered office address:	NIA		
Name of New Registered Agent			
(Florida street a	ddress)		
·	NIA . Florida		
New Registered Office Address: (City		(Zip Code)	
and the Community Designation Agent			
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with	and accept the obligations of the p	osition.	
A 11 A			
Signature of New Regis.	tered Agent, if changing		
Check if applicable  ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e),	F.S.		
I the amendment(s) is/are being fried pursuant to s. 607.0120 (11) (c).			

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 = ChiefExecutive 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. NIA Example: John Doc X Change PT X Remove  $\underline{\mathbf{V}}$ Mike Jones Sally Smith <u>SV</u> <u>X</u> Add Address <u>Title</u> <u>Name</u> Type of Action (Check One) 1) \_\_\_\_ Change \_\_\_\_ Add \_\_\_\_ Remove

2) \_\_\_\_ Change

\_\_\_\_ Add

\_\_\_\_ Add

4) \_\_\_\_ Change

\_\_\_ Add

5) \_\_\_\_ Change

\_\_\_ Add

\_\_\_\_ Remove

6) \_\_\_\_ Change

\_\_\_ Add

Remove

Remove

\_\_\_\_ Remove

Remove 3) Change

f amending or adding additions Attach <i>additional sheets, if necess</i>	iary). (Be specifi	ic)			
NIA		<u>,                                      </u>			<u></u>
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f an amendment provides for a provisions for implementing the	ie a <u>mendment if n</u>	ot contained in	the amendmer	t itself:	
(if not applicable, indicate N	!/A)				
VIA					
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The data of each amendment(s) adopt	tion:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 day	s after amendment file date)
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable timent of State's records.	statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted action was not required.	I by the incorporators, or board	of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders was/were suffic	d by the shareholders. The nunient for approval.	nber of votes cast for the amendment(s)
☐ The amendment(s) was/were approve must be separately provided for each	ed by the shareholders through h voting group entitled to vote	voting groups. The following statement separately on the amendment(s):
"The number of votes cast for	the amendment(s) was/were su	fficient for approval
by	(voting group)	
· · · · · · · · · · · · · · · · · · ·	(voting group)	
Dated	25/21	-
Signatura	TTO e	
Signature(By a direct	for president or other officer -	if directors or officers have not been
selected, b	y an incorporator – if in the har	ds of a receiver, trustee, or other court
appointed i	fiduciary by that fiduciary)	
	Dowsher	nel Desci
<del></del>	(Typed or printed name	of person signing)
	Presi	elent
	(Title of person signing	)