P21 0000 51395

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2021 NOV 18 AM 10: 22

SECRETARY OF STATE

CALLARTISSE FINE

COVER LETTER

TO: Amendment Sec Division of Corp		,	•	
NAME OF CORPO	RATION: DAIVA INC			
DOCUMENT NUM	BER: P21000051395			
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.		
Please return all corn	espondence concerning this ma	tter to the following:		
	Makar Kurochkin			
		Name of Contact Person	1	
	DAIVA INC			
		Firm/ Company		
	818 A NE 40TH CT			
		Address		
	OAKLAND PARK, FL 3333	4		
		City/ State and Zip Code		
	maria@dt-group.su			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
Andrei Solodov		at (4257899	
Name	of Contact Person	Area Coo	le & Daytime Telephone Number	
Enclosed is a check f	or the following amount made	payable to the Florida Depa	rtment 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			Address	
Amendment Section		Amendment Section		
Division of Corporations		Division of Corporations		
P.O. Box 6327			entre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

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DAIVAINC	2021 NOV 18 AM 10: 22
\	y filed with the Florida Dept. of State) SECRETARY OF STATE
P21000051395	TALLAHASSEE FLORES
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, this a its Articles of Incorporation:	Florida Profit Corporation adopts 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 word "corporation," "c". "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address, if applicable:	818 A NE 40TH CT
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	OAKLAND PARK, FL 33334
C. Established address if and inchis	
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:	
Name of New Registered Agent	
Name by New Registered Agent	
(Florida stre	vet address)
·	
New Registered Office Address:	, Florida (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	
т негеоу ассерсте арронитет из гедімегей идеті. Тип јатиш ж	пп ана ассері те овиданотѕ ој те рохиюн.
Signature of New Re	egistered 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)

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1)Change	VP	Galina Smetanina	731 LYONS ROAD, APT 16206
X Add			COCONUT CREEK, FL 33063
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Pomove			

	. (Be specific)
·	
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lan amandmant aravidas for an ara	change, reclassification, or cancellation of issued shares,
provisions for implementing the am	nendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	· · · · · · · · · · · · · · · · · · ·
(if not applicable, indicate N/A)	

The date of each amendment(s	11/15/2021) adoption:	, if other than th
date this document was signed.		
	1/15/2021	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, the Department of State's records.	is date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment sufficient for approval.	nent(s)
	approved by the shareholders through voting groups. The following state for each voting group entitled to vote separately on the amendment(s):	ntement
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
11/15/20	021	
Dated		
Signature		
(By selection	diffector, president or other officer – if directors or officers have not be eted, by an incorporator – if in the hands of a receiver, trustee, or other pinted fiduciary by that fiduciary)	
	Makar Kurochkin	
	(Typed or printed name of person signing)	· · · · · · · · · · · · · · · · · · ·
	President	
	(Title of person signing)	