P24000025707

(Requestor's Name)				
	(Address)			
	(Address)			
	(City/State/Zip/Phone #)			
PICK-UF	P WAIT	MAIL		
	(Business Entity Name)			
	(Document Number)			
Certified Copies	Certificates of S	Status		
Special Instructions to Filing Officer.				
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COVER LETTER

		COVEREETTER	
TO: Amendment Section Division of Corporati	ons		4
NAME OF CORPORATION: DIANA'S JEWERLY INC			
DOCUMENT NUMBER: P24000025707			
The enclosed Articles of A	Imendment and fee are sub	omitted for filing.	
Please return all correspon	dence concerning this matt	ter to the following:	
В	ERTHA M FONSECA		
		Name of Contact Person	
DIANA'S JEWERLY INC		. value of contact relatin	
		Firm/ Company	
1675 W 49TH ST		. ,	
Address			
HIALEAH, FL 33012			
City/ State and Zip Code			
MFONSECA595@GMAIL.		СОМ	
	E-mail address: (to be use	ed for future annual report	notification)
For further information cor	ncerning this matter, please	e call:	
BERTHA M FONSECA		at (592-1596
Name of Co	ontact Person	Area Cod	e & Daytime Telephone Number
Enclosed is a check for the	following amount made p	ayable to the Florida Depa	rtment of State:
■ \$35 Filing Fee	S43.75 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)

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327

Tallahara ... DI 22214

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee

Articles of Amendment to Articles of Incorporation of

	\mathbf{D}	PLANAI	IEWERI	VINC
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DIANA'S JEWERLY INC	
(Name of Corporation as	currently filed with the Florida Dept. of State)
P24000025707	
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	utes, this Florida Profit Corporation adopts the following amendment(
A. If amending name, enter the new name of the corpo	ration:
name must be distinguishable and contain the word "corpor	The new ation," "company." or "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name must contain the word on "P.A."
B. Enter new principal office address, if applicable:	1675 W 49TH ST
(Principal office address MUST BE A STREET ADDRES	STE T4636
	HIALEAH, FL 33012
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	10089 NW 128TH TER
	HIALEAH GARDENS, FL 33018
·	
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office NOT APPLICATION Name of New Registered Agent	e address:
•	Florida street address)
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	
	2021
Signature	of New Registered Agent, if changing
Check if applicable	
☐ The amendment(s) is/are being filed pursuant to s. 607.6	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.

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>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)
NOT APPLICABLE	
	
	-
	- · · - · · · · · · · · · · · · · · · ·
provisions for implementing the arms	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nument is not contained in the amendment issert.
NULLAPPI II AMI P	
NOT APPLICABLE	

The date of each amendment(s) adol date this document was signed.	otion:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	<u> </u>	
	(no more than 90 days after amendment file da	te)
Note: If the date inserted in this bloc document's effective date on the Depa	k does not meet the applicable statutory filing requirement of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board of directors without share	cholder action and shareholder
☐ The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes cast for the acient for approval.	mendment(s)
	ved by the shareholders through voting groups. The following ch voting group entitled to vote separately on the amendm	
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
04/29/2024 Dated	6 3	
Signature	HUCK	
selectéd, l	ctor, <u>presi</u> dent or other officer – if directors or officers have an incorporator – if in the hands of a receiver, trustee, of fiduciary by that fiduciary)	
	BERTHA M FONSECA	
	(Typed or printed name of person signing)	
	PRESIDENT	
_	(Title of person signing)	