P24000064013

(Re	equestor's Name)	
(Ac	ddress)	
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PICK-UP	MAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer.	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: DELIA DAVIE IN	IC .			
	1BER: P24000064013				
	es of Amendment and fee are su	bmitted for filing.			
Please return all con	respondence concerning this ma	itter to the following:			
	CALOGERO ALAIMO				
		Name of Contact Person	1		
	DELIA DAVIE INC				
		Firm/ Company			
	7791 NW 46TH ST SUITE 121 - 122				
	Address				
	DORAL, FL 33166	71434-0,30			
		City/ State and Zip Cod			
		City/ State and Zip/Cod			
	MVANEZ@ALAIMOGROU	JPUSA.COM			
	E-mail address: (to be us	sed for future annual report	notification)		
For further informat	ion concerning this matter, pleas	se call:			
CALOGERO ALAIMO		305 at (854-5407		
Name	e of Contact Person	at () Area Code & Daytime Telephone Number			
	e i ali i				
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State;		
S35 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			Address		
	nendment Section	Amendment Section			
Division of Corporations		Division of Corporations			
	P.O. Box 6327 Tallahassoc FL 32314		The Centre of Tallahassee		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

DELIA DAVIE INC

(Name of Corporation as current	tly filed with the Flori	do Dont of Stat	n 1	
P24000064013	illy med with the Phili	ua izepi. oi stat	<u>c</u>)	
(Document Number	of Corporation (if know	vn)		
Pursuant to the provisions of section 607,1006, Florida Statutes, this ts Articles of Incorporation:	s Florida Profit Corpor	cation adopts the	followin	g amendment(s)
A. If amending name, enter the new name of the corporation:	·			
				The new
name must he distinguishable and contain the word "corporation," ' 'Inc.," or Co.," or the designation "Corp," "Inc," or "Co". 'chartered," "professional association," or the abbreviation "P.A.	A professional corpor			
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)				
· · · · · · · · · · · · · · · · · · ·			<u> </u>	1
				<u></u>
Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		er-	3% ⁷	1
•			- :	7
);.	<i>17.</i> 3
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address		the name of the	<u> 5</u>	
Name of New Registered Agent				
				-
(Florida si	treet address)			-
		, Florida		
New Registered Office Address:	(City)	, 1 1011da		Code)

 \square 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	PT	John De	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	P		SACRED FAMILY INVESTMENTS	7791 NW 46TH ST
Add		_		DORAL, FL 33166
X Remove				
2) Change	P		CALOGERO ALAIMO MANCUSO	7791 NW 46TH ST
X Add				SUITE 121 - 122
Remove 3) Remove		_		DORAL, FL 33166
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
provisions for implementing the amendment if not contained in the amendment itself:	
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provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
(і) пот аррпсите. такан (ул)	

) adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file de	ite)
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirem Department of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without share	reholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the e sufficient for approval.	amendment(s)
	approved by the shareholders through voting groups. The follo for each voting group entitled to vote separately on the amenda	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
10/30/20	124	
Dated	Signed by:	
Signature	f i ni ·	
(By sele	a director, president officer – if directors or officers have ted, by an incorporator – if in the hands of a receiver, trustee, cointed fiduciary by that fiduciary)	
	CALOGERO ALAIMO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	