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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Y. CILIBERTI DI	AMONDS, INC	
DOCUMENT NUM	IBER: P93000045284		
The enclosed Article	s of Amendment and fee are su	ibmitted for filing.	
Please return all corr	espondence concerning this ma	atter to the following:	
	ALINE DARMOUNI		
		Name of Contact Persor	1
	ORCOM US		
		Firm/ Company	
	1200 BRICKELL AVE		
		Address	.
	MIAMI FL 33131		
		City/ State and Zip Cod	e
	office@orcomus.com		
	E-mail address: (to be us	sed for future annual report	notification)
for further information	on concerning this matter, plea.		600 4405
	of Contact Person	at (305) de & Daytime Telephone Number
	or the following amount made		, ,
S35 Filing Fee	☐S43.75 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co 2415 N	Address Iment Section In of Corporations Interest of Tallahassee I. Monroe Street, Suite 810 Issee, FL 32303

Articles of Amendment to Articles of Incorporation of

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- 1		\ . I L	11311111	-1312438303:513.5.	1111

L, CILIDER H DIAMONDS, INC.	in the land
(Name of Corporation	n as currently filed with the Florida Dept. of State PH 4: 28
93000045284	
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida S ts Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendme
A. If amending name, enter the new name of the cor FALBER DIAMONDS INC	
ame must be distinguishable and contain the word "corp	The new poration," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word lation "P.A."
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDR</u>	RESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered	d office address in Florida, enter the name of the
new registered agent and/or the new registered of	ffice address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
<u>меж кедіметей Одісе лиагем.</u>	(City) (Zip Code)
	am familiar with and accept the obligations of the position.
Signati	ure of New Registered Agent, if changing
Check if applicable	

 \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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
<i>δ</i>) Change			
Add			
Remove			

	sheets, if necessary).	(Be specific)				
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	_	-				
					<u>-</u>	
				-		
					<u>. </u>	
f an amendment p	provides for an exch	ange, reclassifica	tion, or cancella	tion of issued sh	ares,	
<u>provisions for im</u> (if not applica	plementing the ame able, indicate N/A)	<u>nament 11 not con</u>	itained in the an	ienament itsen:		
το πια αγγιιέσ	THE, MILITERIAL THEFT					
				<u></u>		

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The date of each amendmendate this document was signed	•			, if other than the
Effective date <u>if applicable</u> :				
	(no	more than 90 days	after amendment file date)	
Note: If the date inserted in locument's effective date on			atutory filing requirements, this da	te will not be listed as the
Adoption of Amendment(s)	(<u>CHECK</u>	ONE)		
➤ The amendment(s) was/w action was not required.	ere adopted by the incorp	porators, or board o	t directors without shareholder action	on and shareholder
☐ The amendment(s) was/w by the shareholders was/v			er of votes east for the amendment(s)
			oting groups. The following statema parately on the amendment(s):	ent
"The number of vote	es east for the amendmen	nt(s) was/were suffi	cient for approval	
bv			<u>.</u> .	
	(voting gr	roup)		
Dated	Mard 13th	2023.		
6'	A			
Signature _ (By a director, president of	or other officer – if	directors or officers have not been	
	elected, by an incorpora ppointed fiduciary by th		of a receiver, trustee, or other cour	ī
	(Type	<u>∼ De η γγ</u> d or printed name o	f person signing)	
	- Aul	thorized	Representative	
	(Title	of person signing)	1	

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