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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: ____ DIADEMA INC DOCUMENT NUMBER: P97000039203 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JUAN A FIGUEROA Name of Contact Person JUAN A FIGUEROA PA CPA Firm/ Company 1428 BRICKELL AVENUE STE 206 Address MIAMI, FLORIDA 33131 City/ State and Zip Code CARMEN@JAFCPA.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305) 448-5844

Area Code & Daytime Telephone Number JUAN A FIGUEROA Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & **□\$**43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

DIADEMA,INC-		
(Name of Corporation a	s currently filed with the Florida D	Dept. of State)
P97000039203		
(Document	Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statis Articles of Incorporation:	atutes, this Florida Profit Corporation	n adopts the following amendment(s) to
A. If amending name, enter the new name of the corpo	oration:	
N/A		The new
name must be distinguishable and contain the word "c "Corp.," "Inc.," or Co.," or the designation "Corp.," " word "chartered," "professional association," or the abb	Inc," or "Co". A professional corp	orporated" or the abbreviation
P. Enter your principal office address if analysis like	N/A	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE.	SS)	=
-		
		in I
		
C. Enter new mailing address, if applicable:	N/A	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		1 mar
		3 ,
		,
D. If amending the registered agent and/or registered		name of the
new registered agent and/or the new registered offic	<u>ce address:</u>	
Name of New Registered Agent N/A		
	(Florida street address)	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
New Registered Office Address:	(Cin)	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register	red Agent:	
I hereby accept the appointment as registered agent. I an		tions of the position.
	-	
Signatur	e of New Registered Agent, if changing	ng

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	D	CASTILLO, ALFONSO	300 S POINTE DRIVE
Add			#4102
X Remove			MIAMI BEACH, FL. 33139
2) Change	D	CASTILLO, LUZ F	300 S POINTE DRIVE
Add			#4102
X Remove			MIAMI BEACH, FL. 33139
3) Change	D	CASTILLO, RODRIGO	300 S POINTE DRIVE
Add			#4102
X Remove			MIAMI BEACH, FL. 33139
4) Change	D	ZANNOL, MARIA FERNANDA	300 S POINTE DRIVE
X Add			#4102
Remove			MIAMI BEACH, FL. 33139
5) Change			
Add			
Remove			
) Change			· · · · · · · · · · · · · · · · · · ·
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
N/A	
· · · · · · · · · · · · · · · · · · ·	
•	
F. 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)	
N/A	

The date of each amendment	09/19/18 s) adoption:, if other than the
date this document was signed.	
Effective date if applicable:	09/19/18
	(no more than 90 days after amendment file date)
Note: If the date inserted in the document's effective date on the	nis block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes	east for the amendment(s) was/were sufficient for approval
by	<u> </u>
	(voting group)
action was not required.	adopted by the board of directors without shareholder action and shareholder
action was not required.	adopted by the incorporators without shareholder action and shareholder
09/20/1 Dated	8
Dated	
Signature +	
	a director, president or other officer - if directors or officers have not been
Scie	cted, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	GONZALO X CASTILLO
	(Typed or printed name of person signing)
	Ð
	(Title of person signing)