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## **COVER LETTER**

TO:

TO: Registration Se Division of Cor			
	roup Holdings LLC	•	
SUBJECT:	Name of Lim	ited Liability Company	. <u></u>
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Ryan Aheijon		
		Name of Person	
	Dynamic Group Holdings	LLC	
		Firm/Company	<del></del>
	7453 Via Luria		
	<del></del>	Address	
	Lake Worth, FL 33467		
		City/State and Zip Code	
	ryanabeijon1@gmail.com		
I' - Couk - information	E-mail address: ( oncerning this matter, please c	to be used for future annual report no	outication)
Samantha Bauman-Abei	jon	561 716-2067 at ()	me Telephone Number
Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed is a check for th	ne following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration S		Street Address: Registration S	Section
Division of C		Division of Co	orporations
P.O. Box 632		The Centre of	Tallahassee oe Street, Suite 810
Tallahassee, l	ロレ ライチ1年	2410 IN. MIOIII	or paret, butte tito

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Dynamic Group Holdings LLC		207	
( <u>Name of the Limited Liah</u> (A Flor	pility Company as it now appears on our records.) ida Limited Liability Company)		1 !
The Articles of Organization for this Limited Liability Florida document number L20000150060	Company were filed on June 2, 2020	and a	issigned
This amendment is submitted to amend the following:		7: 04 	k.)
A. If amending name, enter the new name of the li	mited liability company here:	-	
The new name must be distinguishable and contain the words "L	imited Liability Company," the designation "LLC" o	or the abbreviation '	L.L.C."
(Principal office address MUST BE A STREET ADI	DRESS)		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)	<del>_</del>	_ <del>_</del>	
B. If amending the registered agent and/or register agent and/or the new registered office address here		e name of the n	iew register
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	, Flori	ida	
	City	Zip Cod	le

## New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Ryan Abeijon	7453 Via Luria	<b>=</b> Add
		Lake Worth, FL 33467	□Remove
			□Change
AMBR	IBR Samantha Bauman-Abeijon	7453 Via Luria	■Add
		Lake Worth, FL 33567	□Remove
			Change
_			□Add
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ective date, if other than the date in effective date is listed, the date must be te: If the date inserted in this bloc cument's effective date on the Dep	e specific and cannot be pri k does not meet the appl	or to date of filing or mor icable statutory filing	(option te than 90 days after fil requirements, this d	ing.) Pursuant to 605.0207
ecord specifies a delayed effective of sfiled.	late, but not an effective	time, at 12:01 a.m. or	the earlier of: (b)	The 90th day after the
June 30	2020	·		
ted				
ted June 30	Ryan Akay	>		