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COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: at (954) 975 - 314-3

Area Code & Davtime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □S43.75 Filing Fee & ☐S43.75 Filing Fee & ☐S52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section Division of Corporations **Division of Corporations**

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment

to

Articles of Incorporation of

DUNAMIC Color I	nC filed with the Florida Dept. of State)
A 3	filed with the Florida Dept. of State)
<u> </u>	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "co". "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:	
Name of New Registered Agent 200 PARK (Florida street New Registered Office Address: POWPANO BL	1 entral Blud. 5 er address) Ach FL Florida 33064 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	oith and accept the obligations of the position.
Signature of New Re	gistered Agent, if changing

Check if applicable

[☐] 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> <u>John</u>	Doe	
X Remove	<u>V</u> <u>Mike</u>	<u> Jones</u>	
X Add	SV Sally	<u>r Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	DIR	TAR HADINGS LLC JEHREY ROSCHMAN TRUS	200 PARK Central Blud S THE Pompano Beach, FZ
Remove 2) Change Add	CFO	Felix L Freuers	33064 200 Park Central BlvD. S. Pompono Beach, E 33064
Remove 3) Change Add			
Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change			
Add Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
 	
	
	1 Constitution of Second School
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	thuman in an Continue in the amendment states

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The date of each amendment(s) adoption: _	December	2,	2020	, if other than the
date this document was signed.		,		
Effective date if applicable:	December	2,	2020	
interior date in appreciable.	(no more than 90 days aj	îter amei	ndment file date)	
Note: If the date inserted in this block does to document's effective date on the Department of		tutory fi	ling requirement	s, this date will not be listed as the
Adoption of Amendment(s) (Cl	HECK ONE)			
☐ The amendment(s) was/were adopted by the action was not required.	e incorporators, or board of	director:	s without shareho	older action and shareholder
by the shareholders was/were sufficient for	e shareholders. The number approval.	r of vote	s cast for the ame	endment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting				
"The number of votes cast for the amo	endment(s) was/were suffic	ient for a	approval	
by				
(ve	ting group)			
Dated	2/2020			
Signature(By a director, pre	Lily Didelet sident or other officer - if d	irectors	or officers have	not been
	corporator – if in the hands by by that fiduciary)	of a rece	iver, trustee, or o	other court
	HEUX L. FIDENT		i min a	
	(Typed or printed name of	persons	nguing)	
				
	(Title of person signing)			