2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000122502

Entity Name: DMYTRO US, INC.

FILED Jul 22, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

14229 FALLS CHURCH DR #1706

ORLANDO, FL 32801 ORLANDO, FL 32837

Current Mailing Address: New Mailing Address:

613 SABAL LAKE DR. 14229 FALLS CHURCH DR #1706

205 ORLANDO, FL 32837 LONGWOOD, FL 32779

FEI Number: 45-0481559 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

DANDYK, DMYTRO DANDYK, DMYTRO 613 SABAL LAKE DR 14229 FALLS CHURCH DR # 205 # 1706

LONGWOOD, FL 32779 US ORLANDO, FL 32837 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DONDYK DMYTRO 07/22/2005

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition DONDYK, DMYTRO DONDYK, DMYTRO Name: Name:

613 SABAL LAKE DR #205 Address: 14229 FALLS CHURCH DR #1706 Address:

City-St-Zip: LONGWOOD, FL 32779 City-St-Zip: ORLANDO, FL 32837

() Delete Title: Title: (X) Change () Addition

Name: TETAN, MARIA Name: TETAN, MARIA

3925 GARDEN PLAZA WAY #501 Address: 14229 FALLS CHURCH DR #1706 Address:

ORLANDO, FL 32837 ORLANDO, FL 32837 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONDYK DMYTRO 07/22/2005 D

Electronic Signature of Signing Officer or Director

Date