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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ΓΙΟΝ:	Dunmar Group	, Inc.			
DOCUMENT NUMBER	P09000040586					
The enclosed Articles of	Amendment and fee are su	ibmitted for filing.				
Please return all correspo	ndence concerning this ma	atter to the following:				
		Loribeth Dunm	nan			
_	Name of Contact Person					
	Dunmar Group, Inc.					
_	Firm/ Company					
	85101 Commercial Park Drive					
Address						
Yulee, FL 32097						
		City/ State and Zip	Code			
		loridunman@dunmar	rgroup.	.com		
······································	E-mail address: (to be u	sed for future annual re	eport n	otification)		
For further information co	oncerning this matter, plea	se call:				
Loribeth Dunman		90at ()4	583-1946		
Name of C	Contact Person	Are	ea Cod	e & Daytime Telephone Number		
Enclosed is a check for th	e following amount made	payable to the Florida	Depar	tment of State:		
☐ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)		□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Amend Divisio P.O. Bo	ment Section n of Corporations ox 6327 ssee, FL 32314	A D C	mendn Ivision Iifton I	Address nent Section n of Corporations Building cecutive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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	Dunmar Group, Inc.		" OEI 27	AM (0: 05
			Secre	
(Name of Corp	oration as currently fil		la Dent. of State)	FEB HIS
	P090000405	86		غم تروه ۱۹۰۵ مه
(D	Document Number of Co	rporation (if know	n)	
rsuant to the provisions of section 607.1006, F Articles of Incorporation:	florida Statutes, this Flor	rida Profit Corpor	ation adopts the follo	owing amendmen
If amending name, enter the new name of t	the corporation:			
	N/A			The new
me must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation " ord "chartered," "professional association," o	Corp," "Inc," or "Co"	'. A professional		ne abbreviation
Enter new principal office address, if appli	iooblar		N/A	
rincipal office address MUST BE A STREET			-	
	-			
	_			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	E BOX)		N/A	
	-			
	-			
If amending the registered agent and/or re	gistered office address	in Florida, enter (the name of the	
new registered agent and/or the new regist				
Name of New Registered Agent		N/A		
	· · · ·			
	(Florida street a	address)		
V 6	,	N/A		
New Registered Office Address:	(Cit	 v)	, Florida	Zip Code)
	(•		erry account
w Registered Agent's Signature, if changing				
ereby accept the appointment as registered ag	ent. I am familiar with	and accept the obl	igations of the positi	on.
	Signature of New Regis			
	- NUMBER OF ARM ROUS	aerea aaent 11 cha	ทอเทอ	

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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		Derrick D. Dunman	85101 Commercial Park Drive
Add			Yulce, FL 32097
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)
	N/A
	
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f an amendment provides for an exch provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: N/A
provisions for implementing the ame	endment if not contained in the amendment itself:
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The date of each amendment(s) adoption:	09/25/2017	, if other than th
date this document was signed.		, it outer than th
	10/01/2017	
Effective date if applicable:		
•	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not document's effective date on the Department of St	meet the applicable statutory filing requirements, this date will tate's records.	not be listed as the
Adoption of Amendment(s) (CHE	CK ONE)	
☐ The amendment(s) was/were adopted by the sh by the shareholders was/were sufficient for app	proval.	
	shareholders through voting groups. The following statement roup entitled to vote separately on the amendment(s):	
"The number of votes cast for the amenda	ment(s) was/were sufficient for approval	
by	ı,	
(votin	g group)	
The amendment(s) was/were adopted by the boaction was not required.	oard of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted by the incaction was not required.	corporators without shareholder action and shareholder	
09/25/2	2017	
Dated		
	ent or other officer – if directors or officers have not been porator – if in the hands of a receiver, trustee, or other court by that fiduciary)	_
	Loribeth Dunman	
(T)	yped or printed name of person signing)	
	President	
	(Title of person signing)	