## P130008449

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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CSC - WILMINGTON , 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Jiminez ashley.jiminez@cscglobal.com

Date: April 25, 2018

Order#: 180212/010

Re: DYNAMIC CAPITAL, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX \_\_\_ Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Ashley Jiminez c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	ange is submitted for a corporation organ	nized under the laws of the State of FLORIDA ered agent, or both, in the State of Florida.	- <del>-</del>
1. The name of	the corporation: DYNAMIC CAPITAL, IN	с.	
2. The principal	office address: 1750 BARCELONA WAY	Y, WINTER PARK, FL 32789	
3. The mailing	address (if different):		
4. Date of incom	poration/qualification: 10/07/2013	Document number: P13000082619	<del></del>
	d street address of the current registered a artment of State: (If resigned, enter resigned	agent and registered office on file with the	多至
	CORPORATE CREATIONS NETWOR	RK INC.	27
	11380 PROSPERITY FARMS ROAD #	#221E	建 二
	PALM BEACH GARDENS	FL 33410	圣马士
6. The name an (if changed):	nd street address of the new registered age	ent (if changed) and /or registered office	
	1201 Hays Street		
	P.O. Box NO	T acceptable	
	Tallahassee	FL 32301	
		address of the business office of its registered a	gent,
authorized by	the board, or the corporation has been no	d by its board of directors or by an officer so otified in writing of the change.	
Signal	ture of an officer of director	Printed or typed name and title	4 4 <u>340</u>
performance of agent. Or, if the hereby confirm	nt the appointment as registered agent ar to comply with the provisions of all sta if my duties, and I am familiar with and his document is being filed merely to ref in that the corporation has been notified On Service Coppany	tutes relative to the proper and complete accept the obligation of my position as registered lect a change in the registered office address t	<b>d</b>
By: I Inc	ignature of Registered Agent	04/25/2018	
If signing on b	ehalf of an entity:		
Grace E. Kirb	y, Asst. Vice President		
	Typed or Printed Name		
	* * * FILING F	EE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)