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Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-5381

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From: Account Name : C T CORPORATION SYSTEM  
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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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FLORIDA PROFIT/NON PROFIT CORPORATION  
DYNAMIC SALES FLORIDA CORP.

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 1       |
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October 22, 2013

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

SUBJECT: DYNAMIC SALES FLORIDA CORP.  
REF: W13000058499

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The name designated in your document is distinguishable on our records. However, the name is similar to a name already on file with this office. Therefore, the use of this name may result in future complications. The name of the existing entity is : DYNAMIC SALES LLC (L13000132446), document number .

You may 1.) resubmit the document under the current name; or 2.) choose to file under another name. If you choose to file under another name, please make the appropriate correction throughout the document(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Pamela Smith  
Regulatory Specialist II

FAX Aud. #: H13000233497  
Letter Number: 413A00024591

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**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**The name of the corporation shall be: **DYNAMIC SALES & MANAGEMENT CORP.****ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address

Mailing address, if different is:

**5510 LE JEUNE ROAD****CORAL GABLES, FL 33146****ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**Any lawful purpose including tele-communications****ARTICLE IV SHARES**The number of shares of stock is: **200 No Par Value****ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: **Carlos A. Rojas, Director**Address: **3232 Coral Way, Apt. 1609  
CORAL GABLES, FL 33145**Name and Title: **Spyros Alexander Karavias, Director**Address: **5510 Le Jeune Road  
Coral Gables, FL 33146**

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

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Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Carlos A. Rojas  
Address: 5510 LE JEUNE ROAD  
CORAL GABLES, FL 33146

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Carlos A. Rojas  
Address: 3232 Coral Way, Apt. 1809  
CORAL GABLES, FL 33145

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Carlos A. Rojas  
Required Signature/Registered Agent

10/21/13  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Carlos A. Rojas  
Required Signature/Incorporator

10/21/13  
Date

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