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## **COVER LETTER**

TO: Amendment Section

Division of Corporations	
AME OF CORPORATION: DYNAMIC INTEL BROUP, 100  OCUMENT NUMBER: P1500000 801	
OCUMENT NUMBER: 115 00000 801	
ne enclosed Articles of Amendment and fee are submitted for filing.	
ease return all correspondence concerning this matter to the following:	
BARRY ITIKIN Name of Contact Person	
DYNAMIC INFO BROUP, INC (NEW)	
DYNAMIC INFO BROUP, INC (NEW)  Firm/ Company  5100 West WPans 120acl #710  Address	
MARGATI, FL 33063	
MARGATI, FL 33063  City/State and Zip Code  BARRYSRC @ COMCast, NCT	
E-mail address: (to be used for future annual report notification)	
·	
or further information concerning this matter, please call:	
BARRY ItiKin at 954 263-1011  Name of Contact Person Area Code & Daytime Telephone Number	
Name of Contact Person Area Code & Daytime Telephone Number	
aclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee & Certificate of Status (Additional copy is enclosed)  \$35 Filing Fee & Certified Copy (Additional Copy is enclosed)	
Mailing Address Street Address	
Amendment Section Amendment Section	
Division of Corporations  Division of Corporations	
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle	
rananassee, re 52514 2001 executive Center Circle	

Tallahassee, FL 32301

## **Articles of Amendment**

Articles of Incorporation

DYNAMAC INTEL	6ROUPINC.
	ently filed with the Florida Dept. of State)
P 15 00000 (Document Number	er of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, t its Articles of Incorporation:	his Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	<u>.</u>
name must be distinguishable and contain the word "corpora" "Corp.," "Inc.," or $Co.$ ," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Same
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA Same
D. If amending the registered agent and/or registered office a	address in Florida, enter the name of the
Name of New Registered Agent  (Florida	ress: A  A  A  A  A  A  A  A  A  A  A  A  A
New Registered Office Address:	(City) , Florida (Zip Code)
	ent:

## 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	<u>v</u>	Mike Jones	DI)	Same
X Add	<u>sv</u>	Sally Smith	190	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		Address
1) Change				
Add				
Remove				
2) Change			No	
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Remove				
6) Change		<del></del>		
Add				
Remove				

If amending or addit (Attach additional she	g additional Articles, its, if necessary). (Be	enter change(s) here: especific)			
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The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: Munch 4, 2016  (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will redocument's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by // A	
by	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated March 4, 2016 Signature Schw.	_
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
BARRY HIKIN	
(Typed or printed name of person signing)	
President	
(Title of person signing)	•