P15000013339

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: DYNAMIC GRO	UP CORPORATION			
DOCUMENT NUMI	DISONOGERAZO				
The enclosed Articles	of Amendment and fee are su	abmitted for filing.			
Please return all corre	spondence concerning this ma	atter to the following:			
	HERNANDO CUADROS				
		Name of Contact Perso	n		
	DYNAMIC GROUP CORPORATION				
		Firm/ Company			
	150 LAKEVIEW DR APT 2	04			
		Address			
	WESTON, FL 33326				
		City/ State and Zip Cod	e		
For further informatio	E-mail address: (to be us	Security Sec	tion Egmail.com		
HERNANDO CUAD	ROS	at (470-7868		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for	r the following amount made	payable to the Florida Dep	artment of State:		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ame Divi P.O	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Ameno Divisio The C 2415 I	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		

Articles of Amendment to Articles of Incorporation of

DYNAMIC GROUP CORPORATION

(Name of Corporation as currently filed with the Florida Dept. of State) P15000013339 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: __. Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
T) Change	D	CUADROS, LORENA	68 SIMONTON CIRCLE
Add		· · · · · · · · · · · · · · · · · · ·	WESTON FL 33326
X Remove			
2) Change	D	CUADROS, LINA M	150 LAKEVIEW DR
Add			APT 204
X Remove 3) Change			WESTON FL 33326
Add			
Remove			
4)Change			
Add			
Remove			
5) Change	_		
Add			
Remove			
6) Change			
Add			
Remove			

(Attach a	ding or adding additional additional sheets, if necessar	y). (Be specific)			
N/A					
	 				
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<u>provisi</u>	nendment provides for an o ons for implementing the	exchange, reclassifica amendment if not cor	ition, or cancellation o ntained in the amendm	f issued shares, ient itself:	
(if)	not applicable, indicate N/A)		<u></u>	
N/A					
					
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) adoption;	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date	·)
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirement. Department of State's records.	its, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without sharel	tolder action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes east for the an a sufficient for approval.	nendment(s)
	approved by the shareholders through voting groups. The follows for each voting group entitled to vote separately on the amendme	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
sele	a director, president or other officer – if directors or officers have cted, by an incorporator – if in the hands of a receiver, trustee, or ointed fiduciary by that fiduciary)	
	HERNANDO CUADROS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	