P15000082347

(Requestor's I	Name)
(Address)	
(Address)	
(City/State/Zip	o/Phone #)
	, <u></u>
PICK-UP W	AIT MAIL
(Business En	tity Name)
(Document No	umber)
Certified Copies Cert	tificates of Status
Special Instructions to Filing Office	oor:
Special instructions to Filing Office	ei.

Office Use Only



500290112155

09/13/16--01033--002 **43.75

16 SEP 13 AH 8: 50 SECRE FARY OF STATE FALLAHASSEE, FLORING

of colored

4/26/16

B Brick SEP 1 7 2018

COVER LETTER

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: Dynasit USA Inc. **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Lubor Olsovsky Name of Contact Person Dvectis USA Inc. Firm/ Company 511 SE 5th Ave Suite 2120 Address Fort Lauderdale, FL 33301 City/ State and Zip Code lubor1@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305) 905-2122 Area Code & Daytime Telephone Number Lubor Olsovsky Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee ■\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed)

Mailing Address

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

		of			
Dynasit USA Inc.					
(<u>Name</u>	of Corporation as curr	ently filed with the Florid	la Dept. of State)		
<u> </u>	(Document Number	er of Corporation (if known	1)		<u></u>
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, t	his <i>Florida Profit Corpord</i>	ution adopts the following	g amendmer	nt(s) to
A. If amending name, enter the new n	ame of the corporation	<u>.</u>			
Dvectis USA Inc.				The new	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	iation "Corp," "Inc," c	or "Co". A professional (
B. Enter new principal office address, if applicable:		n/a			
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)		j	₹s .	
				8 9 S	
					17
C. Enter new mailing address, if appl		n/a		388 388 3 88	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)				\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
				<u> </u>	
		<u> </u>		<u>6</u>	
D. If amending the registered agent ar	nd/or registered office a	ddress in Florida, enter t	he name of the		
new registered agent and/or the ne					
Name of New Registered Agent	n/a				
	(Florida	a street address)			
New Registered Office Address:	n/a		, Florida		
		(City)	(Zip C	Code)	
N					
New Registered Agent's Signature, if c I hereby accept the appointment as regist			igations of the position.		
	,	•	~ · · ·		

Signature of New Registered Agent, if changing

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change			.
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add		<u> </u>	
Remove			
Kemove			

ı/a	mending or adding additional Articles, enter change(s) here: ach additional sheets, if necessary). (Be specific)
•	
	amendment provides for an exchange, reclassification, or cancellation of issued shares,
pro	ovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
<u></u> 0	(y not applicable, malcule NA)
/a	

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date epartment of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	,"	
	(voting group)	
☐ The amendment(s) was/were ac action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ac action was not required.	opted by the incorporators without shareholder action and shareholder	
9/1/2016 Dated		
	Left Mettelff	
Signature	Mu mony	
select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	Lubor Olsovsky	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	