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**C** LEWIS

## **COVER LETTER**

**TO:** Amendment Section

**Division of Corporations** 

**Mailing Address** 

P.O. Box 6327

Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	DICOCO	MIC ABB 2007-55-2	Inc.	
The enclosed Articles	of Amendment and fee are su	abmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	MeiR A	FLALO		
	Dung	Name of Contact Person		
	Ugnamic	Firm/ Company	<u> </u>	
	5 <del>7</del> 80 s	w 25th	St	Ste. 8
•	West (	ark Address F	L	33023.
	-	City/ State and Zip Cod	le	
E-mail address: (to be used for future articlal report notification)				
For further information concerning this matter, please call:				
Meir	AFLALO	at ( 964	<u>, 297</u>	-6669
Name o	of Contact Person	Area Co	de & Daytim	e Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of Sta	ate:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certified	ate of Status I Copy mal Copy

Street Address

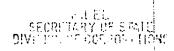
Clifton Building

Amendment Section

**Division of Corporations** 

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



	OI	16 APR 14 AMII: 2
DYNAMIC	ABB Inc.	
(Name of	Corporation as currently filed with the Flori	ida Dept. of State)
P 160000	XX 7552	
	(Document Number of Corporation (if know	vn)
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this Florida Profit Corpo	ration adopts the following amendment(s)
A. If amending name, enter the new par	me of the corporation:	
-		. The new
name must be distinguishable and conta "Corp.," "Inc.," or Co.," or the designa word "chartered," "professional associati	ain the word "corporation," "company," or ution "Corp," "Inc," or "Co". A professional ion," or the abbreviation "P.A."	"incorporated" or the abbreviation corporation name must contain the
B. Enter new principal office address, if		
(Principal office address MUST BE A ST	<u>REET ADDRESS</u> )	<u> </u>
	<del></del>	
C. Enter new mailing address, if applic	able:	<del></del>
(Mailing address MAY BE A POST O	TFICE BUX	
D. If amending the registered egent and	Vor registered office address in Florida, enter	the name of the
new registered agent and/or the new	registered office address:	the name of the
Name of New Registered Agent		•
Name of New Registered Agent		···
-		
	(Florida street address)	
New Registered Office Address:	(City)	, Florida Zin Code)
	(City)	(Zip Code)
	`	
New Registered Agent's Signature, if cha	anging Registered Agent:	
I hereby accept the appointment as register	red agent. I am familiar with and accept the ob	ligations 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.

Process V as Remov	e, ana sai	ny smun, sv as an naa.	!	
Example: X Change	<u>PT</u>	John Doe		
X Remove	$\underline{\mathbf{v}}$	Mike Jones	 	
_X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	Name	Address	
I)Change	5	ILAM M. OHAYON	10275 Glling Are - Suffside, FL 33154	#619
<u></u> ✓ Add		·	Surfside, FL 33154	•
Remove		4		-
2) Change	·*·			
Add				
Remove		•		
3 ) Change				
Add				
Remove				
4) Change	<del> ,</del>			
Add				
Remove			·	
5) Change		- /	•	
Add		<b>\</b>		
Remove				
6) Change				
Add				
Remove				
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Page 2 of 4

tach additional sheets, if necessary). (Be specific)	
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The date of each amendment(s) adoption:	<u> </u>	other than th
date this document was signed.	DIVE IN THE	क्ष भारतीहै
Effective date if applicable: 4111 2016  (no more than 90 days after amendment file date)	16 APR   4	-AH II: 21
(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, the document's effective date on the Department of State's records.	his date will not be	e listed as th
Adoption of Amendment(s) (CHECK ONE)	•	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	ment(s)	:
The amendment(s) was/were approved by the shareholders through voting groups. The following st must be separately provided for each voting group entitled to vote separately on the amendment(s)	latement );	:
"The number of votes cast for the amendment(s) was/were sufficient for approval		
by"		,
by"  (voting group)		,
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and share action was not required.	eholder	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and sharehold action was not required.	der	i , , ,
× Dated 4/11/2016	•	į
★ Signature		;
(By a director, president or other officer – if directors or officers have not selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)		
Meir AFLALD		
(Typed or printed name of person signing)		
President		
(Title of person signing)		