## P18 000011195

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: DESTIN GROUP I	NC 	
	BER: P18000011195		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	LARISA POPOVA		
		Name of Contact Persor	1
	P & L CONSULTING SERV	ICES CORP	
		Firm/ Company	
	2625 EAST 14TH ST STE 20	)5	
		Address	
	BROOKLYN, NY 11235		
	\.	City/ State and Zip Code	
	LARA,POPOVA@PLFINAN	SCE.COM	
	E-mail address: (to be us	ed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
LARISA POPOVA		at (	648-9821
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Division The Co 2415 i	Address iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

## Articles of Amendment Articles of Incorporation

to

DESTIN G	ROUP INC.	4	12:1
(Name of Corporation as curren	tly filed with the	Florida Dept.	of State)
P18000	011195		
(Document Number	of Corporation (if	known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Co	orporation add	opts the following amendment(
A. If amending name, enter the new name of the corporation:			
NIA			The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A	A professional co		
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	N/A	***	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A		
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre		enter the nam	e of the
Name of New Registered Agent N/A			
	tr <b>e</b> et address)		
·			<b></b>
New Registered Office Address:	(City)	1	Florida(Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familian	nt: with and accept to	he obligations	of the position.
Signature of New Check if applicable	Registered Agent.	if changing	

☐ 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> P.T.</u>	John Dog	
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>	Address
1) Change	P	VYACHESLAV YUMAGUZHIN	200 SANDESTIN LN, APT 707
Add			MIRAMAR BEACH, FL 32550
X Remove			
2) Change			
Add			
Remove 3.) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).			
NA			
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If an amendment provides for an exch provisions for implementing the ame	ange, reclassification, or canc	ellation of issued shares,	
(if not applicable, indicate N/A)	idinent ti not contained in the	ramenument usen.	
NA			
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	02/01/2021
The date of each amen	
late this document was	signed.
rine it is to be	02/01/2021
Effective date <u>if applic</u>	able: (no more than 90 days after amendment file date)
	(no more man 90 augs aper amenament jue aute)
	red in this block does not meet the applicable statutory filing requirements, this date will not be listed as the te on the Department of State's records.
Adoption of Amendme	ent(s) (CHECK ONE)
The amendment(s) was not require	as/were adopted by the incorporators, or board of directors without shareholder action and shareholder red.
	ras/were adopted by the shareholders. The number of votes east for the amendment(s) was/were sufficient for approval.
	ras/were approved by the shareholders through voting groups. The following statement provided for each voting group entitled to vote separately on the amendment(s):
"The number of	I votes cast for the amendment(s) was/were sufficient for approval
by	No.
	(voting group)
	08/05/2021
Dated	
Signa	ture
4.5	(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)
	YAROSLAV SURIN
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)