## P180000 111.95

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| PICK-UP WAIT MAIL                       |
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPO  | PRATION: DESTIN GROUP                       | INC.   |  |  |  |  |
|--|---|--|--|--|--|--|
| DOCUMENT NUM   | P18000011195                                |  |  |  |  |  |
| The enclosed Article   | w of Amendment and fee are su               | bmitted for filing.  |  |  |  |  |
| Please return all corr   | espondence concerning this ma               | tter to the following:   |  |  |  |  |
|  | LARISA POPOVA                               |  |  |  |  |  |
|  |   | Name of Contact Persor   | )  |  |  |  |
|  | P & L CONSULTING SERVICES CORP              |  |  |  |  |  |
|  |   | Firm/ Company  |  |  |  |  |
|  | 2625 E 14TH ST STE 205                      |  |  |  |  |  |
|  | <del>* **</del> *                           | Address  |  |  |  |  |
|  | BROOKLYN, NY 11235                          |  |  |  |  |  |
|  | City/ State and Zip Code                    |  |  |  |  |  |
|  | LARA.POPOVA@PLFINANCE.COM                   |  |  |  |  |  |
|  | E-mail address: (to be us                   | sed for future annual report   | notification)  |  |  |  |
| For further informati  | on concerning this matter, pleas            | se call:   |  |  |  |  |
| LARISA POPOVA  |   | at ( <u>718</u>  | 648-9821   |  |  |  |
| Name of Contact Person   |   | Area Code & Daytime Telephone Number   |  |  |  |  |
| Enclosed is a check t  | or the following amount made                | payable to the Florida Depa  | artment of State:  |  |  |  |
| S35 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 |   | Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 |  |  |  |  |

Tallahassee, FL 32303

## Articles of Amendment Articles of Incorporation

| DESTIN GROUP INC.   |                                    |                              |                                      |  |
|---|------------------------------------|------------------------------|--------------------------------------|--|
| (Name   | of Corporation as current          | ly filed with the Florida De | pt. of State)                        |  |
| P18000011195  |                                    |                              |                                      |  |
|   | (Document Number o                 | of Corporation (if known)    |                                      |  |
| Pursuant to the provisions of section 607 its Articles of Incorporation:  | ,1006, Florida Statutes, this      | Florida Profit Corporation   | adopts the following amendment(s) to |  |
| A. If amending name, enter the new n  | ame of the corporation:            |                              |                                      |  |
| N/A   |                                    |                              | The new                              |  |
| name must be distinguishable and contain<br>"Inc.," or Co.," or the designation "Contractered," "professional association," | Corp," "Inc," or "Co". $ec{arphi}$ | A professional corporation   | I" or the abbreviation "Corp"        |  |
| , ,   |                                    | 1435 N COUNTY HIGH           | IWAY 393                             |  |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)                   |                                    | SANTA ROSA BEACH, FL 32459   |                                      |  |
|   |                                    |                              |                                      |  |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)                                     |                                    | 1435 N COUNTY HIGI           | IWAY 393                             |  |
|   |                                    | SANTA ROSA BEACH,            | FL 32459                             |  |
|   |                                    |                              | <u> </u>                             |  |
| D. If amending the registered agent an new registered agent and/or the ne   |                                    |                              | ame of the                           |  |
| Name of New Registered Agent  | JACQUELINE KEITH                   | <del>11.</del>               |                                      |  |
|   | JACQUELINE KETTI                   |                              | <b>_\omega</b>                       |  |
|   | 1435 N COUNTY HIGHWAY 393          |                              |                                      |  |
|   | (Florida sti                       | reet address)                |                                      |  |
| New Registered Office Address:  | SANTA ROSA BEACH                   |                              | . Florida                            |  |
| neg merca vypec marem.  |                                    | (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:

 $P \neq President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$ 

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       |                           |
| <u>X</u> Add                  | <u>sv</u>    | Sally Smith      |                           |
| Type of Action<br>(Check One) | <u>Title</u> | Name             | <u>Addres</u> s           |
| 1) Change                     | P            | YAROSLAV SURIN   | 200 SANDESTIN LN STE 707  |
| Add                           |              |                  | MIRAMAR BEACH, FL 32550   |
| X Remove                      |              |                  |                           |
| 2) Change                     | P            | JACQUELINE KEITH | 1435 N COUNTY HIGHWAY 393 |
| X Add                         |              |                  | SANTA ROSA BEACH, FL 3245 |
| Remove Change                 |              |                  |                           |
| Add                           |              |                  |                           |
| Remove                        |              |                  |                           |
| 4) Change                     |              |                  |                           |
| Add                           |              |                  |                           |
| Remove                        |              |                  |                           |
| 5) Change                     |              |                  |                           |
| Add                           |              |                  |                           |
| Remove                        |              |                  |                           |
| 6) Change                     |              |                  |                           |
| Add                           |              |                  |                           |
| Remove                        |              |                  |                           |

| If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A) |             |
|--|-------------|
| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)  |             |
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| The date of each amendment(s) as date this document was signed.             | -   | _0                             | 1 - 0   | , if other than the                         |
|---|---|--------------------------------|---|---|
| Effective date if applicable:   | 1/2022                                    |                                |   |   |
|   | (no mo                                    | ore than 90 day:               | s after amendment file                          | date)                                       |
| Note: If the date inserted in this b<br>document's effective date on the De | lock does not meet<br>partment of State's | the applicable :<br>records.   | statutory tiling requir                         | ements, this date will not be listed as the |
| Adoption of Amendment(s)  | ( <u>CHECK O</u>                          | <u>(NE</u> )                   |   |   |
| ■ The amendment(s) was/were add action was not required.                    | pted by the incorpor                      | rators, or board               | of directors without s                          | hareholder action and shareholder           |
| ☐ The amendment(s) was/were add<br>by the shareholders was/were st          |   |                                | ber of votes cast for t                         | he amendment(s)                             |
| ☐ The amendment(s) was/were approvided for                                  | proved by the shareh each voting group e  | olders through s               | voting groups. The fore<br>eparately on the ame | dlowing statement<br>ndment(s):             |
| "The number of votes cast   | for the amendment(                        | s) was/were suf                | ficient for approval                            |   |
| by  |   |                                | ··  |   |
|   | (voting grou                              | ip)                            |   |   |
| Signature (By a d<br>selecte  |   | other officer – if in the hand | T directors or officers                         |   |
| аррлп   | • •                                       | -                              |   |   |
|   | JACQUELINE KE                             | ITH                            |   |   |
|   | (Typed c                                  | or printed name                | of person signing)                              | ·   |
|   | PRESIDENT                                 |                                |   |   |
|   | (Title of                                 | person signing                 | )   |   |