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Note: DO NOT bit the REFRESIVEELOAD button on your browser from this page. Doing so will generate another cover theet.

Division of Componations Fax Number : (#50)617-6380 : DS BUSINESS CONSULTANTS, ELC : IZ01900000287 : (954)256-8117 : (954)271-3,004 "Enter the small address for this business entity to be used for futu-enousl report mailings, Enter only one read address please."" COR AMNU/RESTATE/CORRECT OR O/D RESIGN LYN TECH CORP cruficate of Status entified Copy 05 гаде Соин minuted Charge 543.75

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COVER LETTER

TO: Amendment Section Division of Corporations					
NAME OF CORPORATION: LYN TECH CORP					
DOCUMENT NUMBER	R: P18000060085				
The enclosed Articles of	Amendment and fee are su	bmitted for filing.			
Please return all correspondence concerning this matter to the following:					
jL	JAN DIAZ				
		Name of Contact Person			
DS BUSINESS CONSULTANTS, LLC					
Firm/ Company					
1489 S.E. 17FH STREET, SUITE 2J					
Address					
FC	FORT LAUDERDALE, FL. 33316				
		City/ State and Zip Code	:		
ILIAN D	NAZ@TAXCAREINC.CO	М			
	•	ed for future annual report	notification)		
	,				
For further information e	oncerning this matter, pleas	se call:			
JUAN DIAZ		954 at (256-8117		
		le & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:					
S35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	Classified Copy (Additional copy is enclosed)	☐\$52.50 Filing Hee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Amend Divisio P.O. Bo	g Address ment Section n of Corporations ox 6327 issee, FL 32314	Amendi Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee I. Monroe Street, Suite 810 ssee, FL 32303		

LYN TECH CORP

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as current	ly filed with the Florida Dept	of State)	
(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation ad	lopts the following ame	ndment(s) to
A. If amending name, enter the new name of the corporation:		77	
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 corporation m	pr the abbreviation "Co	
B. Enter new principal office address, if applicable:	17001 Collins Ave Apt #3	607	دعيب
(Principal office address MUST BE A STREET ADDRESS)	Sunny Isles Beach, FL331	60 H	020
		E RET	Z
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		H488	-8 [
		10 m m m m m m m m m m m m m m m m m m m	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address. Name of New Registered Agent		ne of the	<u>†</u> 01
(Florida su	reet address)		
	eti adoreszy		
New Registered Office Address:	(Cio)	Florida(Lip Code)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar		of the position.	
Signature of New K	Registered Agent, if changing		
		<u> </u> 	

Example:

If amending the Officers and/or Directors, enter the title and name of each officer/director be	ing 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:

To:

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, Nally 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.

X Change	PT	John Doe	
X Remove	<u>Y</u>	Mike Jones	
X Add	\underline{SV}	Sally Smith	
Type of Action Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	CFO	JUAN ANDRES BIORD PEREDA	17001 Collins Ave Apt #3607
Add			Sunny Isles Beach, FL33160
Remove 2) Change	CEO	DAVID GRUSZKA	17001 Collins Ave Apt #3607
X Add			Sunny Isics Beach, FL33160
Remove 3) Change			
Add			ALIARS
			<i>ξ</i> η <u>~</u>
Add			SEE, FL
Remove			
5) Change Add			
Remove			
5) Change		-	
Add			
Remove			

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provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) N/A

Fax: (850) 617-6380

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rom: Tax Care Fort Lauderd, Fax: 19542568117