# P18000074424

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TO: Amendment Se Division of Cor					
NAME OF CORPO	ORATION: Royal Dynamic Solutions Inc				
DOCUMENT NUM	P18000071424				
	·				
The enclosed Article	es of Amendment and fee are submitted for filing.				
Please return all corr	respondence concerning this matter to the following:				
	Danielle DeCesare				
	Name of Contact Person				
	Royal Dynamic Solutions Ine				
Firm/ Company					
2645 Executive Park Dr. Suite 615					
	Address				
	Weston, FL 33331				
	City/ State and Zip Code				
	royaldynamicsolutions@gmail.com				
	E-mail address: (to be used for future annual report notification)	2. 2.7			
For further informati	ion concerning this matter, please call:				
Danielle DeCesare	754 715-5043 at ()	ن 			
Name	e of Contact Person Area Code & Daytime Telephone Number	_ ; ;			
Enclosed is a check	for the following amount made payable to the Florida Department of State:	· · · · · · · · · · · · · · · · · · ·			
S35 Filing Fee	☐S43.75 Filing Fee & ☐S43.75 Filing Fee & ☐S52.50 Filing Fee Certificate of Status  (Additional copy is enclosed)  ☐S43.75 Filing Fee & ☐S52.50 Filing Fee Certificate of Status  (Additional Copy is enclosed)				

Mailing Address Amendment Section Division of Corporations

P.O. Box 6327

Street Address
Amendment Section

Division of Corporations

The Centre of Tallahassee

#### Articles of Amendment to Articles of Incorporation of

Royal Dynamic Solutions Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P18000071424 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (Zip Code)

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

New Registered Agent's Signature, if changing Registered Agent:

## 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)

Add

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 $\underline{PT}$ John Doe X Remove $\underline{V}$ Mike Jones <u>X</u> Add $\underline{SY}$ Sally Smith Title Address Type of Action <u>Name</u> (Check One) 2645 Executive Park Dr. Suite 615 Danielle DeCesare 1) \_\_\_\_ Change Weston, FL 33331 \_ Add \_ Remove 2645 Executive Park Dr. Suite 615 Austin Tullos 2) \_\_\_\_ Change Weston, FL 33331 \_\_\_\_ Add Remove 3 ) \_\_\_\_ Change \_\_\_\_ Add \_\_\_\_ Remove 4) \_\_\_\_ Change \_\_\_ Add Remove 5) \_\_\_\_ Change \_\_\_\_ Add \_\_ Remove 6) \_\_\_\_ Change

attach additional sheets, if necessary).	(Be specific)	
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an amendment provides for an exc	hange, reclassification, or cancellation of issued shares,	
provisions for implementing the am	endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		•
<del></del>	· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) :	• • 10/13/2023 doption:	, if other than the
late this document was signed. 10/	13/2023	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this epartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareholder a	ction and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendmentificient for approval.	nt(s)
	proved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
N?A		
by	(voting group)	
10/13/202	3	
Dated	A	
//	14 #	
Signature <u>J(</u>	irector, president or other officer - if directors or officers have not bee	
	d, by an incorporator – if in the hands of a receiver, trustee, or other co	
	ted fiduciary by that fiduciary)	
	Austin Tullos	
	(Typed or printed name of person signing)	
	President	- 10 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
	(Title of person signing)	
		- 