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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: DK BOR CORP			
DOCUMENT NUME	P18000085560			
The enclosed Articles	of Amendment and fee are su	ubmitted for filing.		
Please return all corres	pondence concerning this ma	atter to the following:		
	INNA ERLIKH			
		Name of Contact Person	1	
	CORONA TAX SERVICES	INC		
		Firm/ Company		
	3800 S OCEAN DR STE 21	6		
		Address		
	HOLLYWOOD, FL 33019			
	<u></u> -	City/ State and Zip Cod	e	
For further information	concerning this matter, plea	sed for future annual report		
N7-	of Contact Person	at ()	
Name o	I Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment 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		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

DK BOR CORP (Name of Corporation as currently filed with the Florida Dept. of State) P18000085569 (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: 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." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (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: 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

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>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
\underline{X} Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	VP	BORISOV, DMITRY	16950 N BAY RD APT 1014
Add			SUNNY ISLES BEACH, FL 3316
Remove			
2) Change			
Add			
Remove			·
3) 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 NA)		ding or adding ad additional sheets, ij	f necessary).	(Be specific)				
provisions for implementing the amendment if not contained in the amendment itself:								
provisions for implementing the amendment if not contained in the amendment itself:							<u> </u>	
provisions for implementing the amendment if not contained in the amendment itself:						<u>-</u> .		
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provisions for implementing the amendment if not contained in the amendment itself:	fanan	nendment provide	s for an excha	ange, reclassi	lication or ca	ncellation of i	sued shares	
(if not applicable, indicate N/A)	provisi	ions for implemen	ting the amen	dment if not	contained in t	he amendmen	t itself:	
	(if	not applicable, ind	licate N/A)					
		_	•					

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
_		
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date we Department of State's records.	ill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes can	et for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and shareholder	
Dated 1	Ob. 18	
Signature		
seleci	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)	
	BORISOV, DMITRY	
	(Typed or printed name of person signing)	
	VPRESIDENT	
	(Title of person signing)	