

From: Ana Perdomo

Fax: 13057742945

To:

Fax: (850) 617-6380

Page 3 of 7

10/05/2020 5:08 PM

10/05/2020

Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6380

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Account Name : GUZMAN & GUZMAN, P.A.

Account Number : I20080000090

Phone : (305)670-1991

Fax Number : (305)670-1993

*Rewhite
10/15/20*

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

COR AMND/RESTATE/CORRECT OR O/D RESIGN

DUTY FREE DYNAMICS US CORP

Certificate of Status	0
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Page Count	01
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Electronic Filing Menu

Corporate Filing Menu

Help





October 5, 2020

FLORIDA DEPARTMENT OF STATE
Division of Corporations

DUTY FREE DYNAMICS US CORP
9130 S DADELAND BLVD
SUITE 1509
MIAMI, FL 33156US

SUBJECT: DUTY FREE DYNAMICS US CORP
REF: P19000063363

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Pg 4(of 4) is missing. Please include the missing page.

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If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White

Regulatory Specialist II Supervisor

FAX Aud. #: B20000341908

Letter Number: 820A00019303

Articles of Amendment
to
Articles of Incorporation
of

2 - 5 11 9:05

DUTY FREE DYNAMICS US CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

P19000063363

(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:

The new 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**)*

255 Aragon Ave

Second Floor

Coral Gables, FL 33134

C. Enter new mailing address, if applicable:
*(Mailing address **MAY BE A POST OFFICE BOX**)*

255 Aragon Ave

Second Floor

Coral Gables, FL 33134

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:

(City)

Florida

(Zip Code)

Now 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 (1) (c), 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:

☒ Change PT John Doe

☐ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action
(Check One)

Title

Name

Address

1) <input type="checkbox"/> Change	<u>P</u>	<u>MAIRAL, MARTIN A</u>	<u>9130 S Dadcland Blvd</u>
<input type="checkbox"/> Add			<u>Suite 1509</u>
<input checked="" type="checkbox"/> Remove			<u>Miami, Fl 33156</u>
2) <input type="checkbox"/> Change	<u>P</u>	<u>MAIRAL, MARTIN A</u>	<u>255 Aragon Ave</u>
<input checked="" type="checkbox"/> Add			<u>Second Floor</u>
<input type="checkbox"/> Remove			<u>Coral Gables, Fl 33134</u>
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

F. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)

F. 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)

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____"

(voting group)
Dated October 5, 2020

Signature _____
(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)

MAIRAL, MARTIN A

(Typed or printed name of person signing)

President

(Title of person signing)