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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: DYNAMIC REAL	TY GROUP INC	
DOCUMENT NUMB	ER: P96000074570		
The enclosed Articles of	f.4mendment and fee are su	bmitted for filing.	
Please return all corresp	oondence concerning this mat	ter to the following:	
1	MARION OTT		
-		Name of Contact Person	
-		Firm/ Company	
•	110 MERIDIAN AVE APT I	01	
•		Address	
i	MIAMI BEACH FL 33139		
-		City/ State and Zip Code	:
F	MAUL (A) DYNAMI	C-REALTY COR	1
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, please	se call:	
FRANK MEKISKA		at (304-0090
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio Clifton	Address Iment Section on of Corporations a Building Executive Center Circle

Tallahassec, FL 32301

Articles of Amendment to Articles of Incorporation of

DYNAMIC REALTY GROUP INC					
(Name o	f Corporation 28 currently filed	with the Florida Dept. of	(State)		
P96000074570					
	(Document Number of Corpo	oration (if known)			
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this <i>Florid</i>	a Profit Corporation adop	ts the following	amend.	ment(s) to
A. If amending name, enter the new na	me of the corporation:				
			;	The n	6A,
name must be distinguishable and cons "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Co"	ompany," or "incorporat A professional corporatio	ed" or the abl	reviati	on
B. Enter new principal office address, (Principal office address MUST BE A S					_
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)			SECRETAR SECRETAR	19 JUH 61	- <u> </u>
D. If amending the registered agent an new registered agent and/or the new		Florida, enter the name of	of the The		
Name of New Registered Agent	FRANK MEKISKA		(B)	:: ধ্য	-
	410 MERIDAN AVE APT 101		72 55	\circ	
	(Florida street add	lress)			
New Registered Office Address:	MIAMI BEACH	. Fl	33139 Iorida		
	(City)	1	(Zip Co	ode)	-
New Registered Agent's Signature, if c I hereby accept the appointment as regist			f the position.		

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, an 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 = Chie 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 Doc	
X Remove	<u>v</u>	Mike Jones	
	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	P	MARION OTT	520 WEST AVE APT 1004
Add			MIAMI BEACH FL 33139
X Remove			
2) Change	Р	FRANK MERKISKA	520 WEST AVE APT 1004
X Add			MIAMI BEACH FL 33139
Remove			<u> </u>
3) Change			- <u> </u>
Add			12SS A 445
4) Change	<u></u>		
Add			
5) Change	·····		
Add			
Remove			
6) Change			
Add Remove			

amending or adding additional Artitach additional sheets, if necessary).	(Re specific)		
			
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		SLC:	19
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		(2) A - 11 - 14 - 17 - 18	
		그	AH II: 50
an amendment provides for an excl	nange, reclassification, or cancellation of issued shares,	ACHEUTA STATE	=
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:		65 1
(ij noi applicable, maicale NA)		<i>€</i> () >>	
			
			

The date of each amendment(s) adop	otion:	_, if other than th
late this document was signed.		
Effective date if applicable:		·
	(no more than 90 days after amendment file date)	
Note: It the date inserted in this blocking the Department's effective date on the Department.	ck does not meet the applicable statutory filing requirements, this date will artment of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes east for the amendment(s) cient for approval.	
☐ The amendment(s) was/were appromust he separately provided for ea	ived by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	
	r the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopt action was not required.	ted by the board of directors without shareholder action and shareholder	19 1
☐ The amendment(s) was/were adopt action was not required.	ted by the incorporators without shareholder action and shareholder	FILI JUN 12
06-06-2019 Dated		
Signature	//// E	<u> </u>
	ector, president or other officer - if directors or officers have not been	
	by an incorporator – if in the hands of a receiver, trustee, or other court	
appointe	d fiduciary by that fiduciary)	
_	FRANK MEKICKA (Typed or printed name of person signing)	
_	(Title of person signing)	
	(Title of person signing)	