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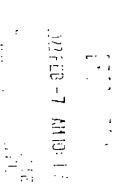
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To

Florida Department of State

Division of corporations

Respectfully I send this explanatory letter in case there is any confusion about my filling amendment requests attached

- I filed on February first 02/01/2022 the dissolution of DREAMPRENEURS HOLDINGS LLC and paid
 the fee for it, see attached the invoice and certificate, however certificate is not showing as
 dissolved just yet. Hopefully by the time this mail gets to you it will be dissolved officially on the
 Sunbiz or/and your records.
- 2) The first of the amendments would be to modify the company's name of **DREAMPRENEURS LLC** for **DREAMPRENEURS HOLDINGS LLC** (recently dissolved which would have release the name for us to take it over)
- 3) Once **Dreampreneurs LLC** is amended will release it name, this will allow the name the amendment of **laura Catalina Ortenzio Ilc** for **Dreampreneurs LLC**

I hope this letter assist or bring clarity of the purpose of the modifications,

Please feel free to reach out if any of the above request are in any way confusing

I will be happy to clarify any doubt

Thank you in advance for your assistance

Respectfully

Laura Ortenzio

Laura.ortenzio@gmail.com

321-512-2886

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJE	T: Dreampieneurs LLC Name of Limited Liability Company	
The end	osed Articles of Amendment and fee(s) are submitted for filing.	
Please	urn all correspondence concerning this matter to the following:	
	Laura Catalina Orten 210 Name of Person	
	Dreampieneurs uc Firm/Company	
	8954 Fluffy WE CT	
	Davenport FL 33896 City/State and Zip Code	
	Dreampreneurs II ca gmail com E-mail address: (to be used for future annual report notification)	
For furt	er information concerning this matter, please call:	
La	O C OFFENZIO at 321 512-2886 Name of Person Area Code Daytime Telephone Number	
Enclose	is a check for the following amount:	
t \$25	O Filing Fee S \$30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	f Status & py

Street Address: Registration Section Division of Corporations

The Centre of Tallahassee

Mailing Address:
Registration Section
Division of Corporations

P.O. Box 6327

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ON -322 FEB - 7	, ,		
	-322 FEB -7	AH (U:	I

Dieampien (Name of the Limited Liabi (A Florid	EULS LLC lity Company as it now appea da Limited Liability Company)	rs on our records.)	THE TE
The Articles of Organization for this Limited Liability Florida document number $L21000195L$	Company were filed on $\underline{0}$	4127/202	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin Dreamprenews The new name must be distinguishable and contain the words "Lin			abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	RESS)		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX			
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	ed office address on our r	ecords, <u>enter the na</u>	me of the new registered
Name of New Registered Agent:			
New Registered Office Address:	Enter Flor	rida street address	
		, Florida	
	City	, F10f1Q a _	Zip Code

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

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	James Ortenzio	8954 AUFFY LIE CT	□Add
		Champions Gate F1 338	96 Remove
			□Change
<u>ambr</u>	Laura ortenzio	8954 Fluffy Lie CT	3 Add
		Champions Gare Fl 33896	□Remove
			□Change
AMBR	Gustavo Jaramillo	1970 E OSCEDLA PRWY	• Add
		Suite 243 Kissimmeef	34743 □Remove
			□Change
			□Add
			□Remove
			□Change
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Effective date, if of (If an effective date is I Note: If the date ir document's effective	isted, the date mus serted in this blo	t be specific and ock does not r	d cannot be prior meet the applic	able statutory fil	more than 90 days a	ptional) fter filing.) Pursuant to this date will not be	
ne record specifies a ord is filed.	delayed effective	e date, but not	t an effective ti	me, at 12:01 a.m	. on the earlier of:	: (b) The 90th day	after the
Dated <u>Fb</u>	2		202	2 Ortenzio			
		Signature of a	member or autho	Orten210	ve of a member		-
				,			