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D. SCOTT JAN 4 2019

COVER LETTER

| TO: Registration Section Division of Corporations | |
|--|---|
| SUBJECT: Dreamstuff 2000 Name of L |), LLC imited Liability Company |
| Dear Sir or Madam: | |
| The enclosed Registered Agent/Registered Office Cha | ange and fee(s) are submitted for filing. |
| Please return all correspondence concerning this matt | er to the following: |
| Donald Ostrander Name of Person | 2818 DEC TU |
| Dreamstuff 2000, LLC Firm/Company | יס ע |
| 184 Pristine Ct. Address | |
| Cotton Wood AL 36320 City/State and Zip Code | |
| dreamstuffehotmail E-mail address: (to be used for future annual rep | port notification) |
| For further information concerning this matter, please | call: |
| Conald Ostrander at (| 863 , 409 - 3557 Area Code & Daytime Telephone Number |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, Florida 32314 |
| Enclosed is a check for the following amou | nt: |
| □ \$25 Filing Fee | \$55 Filing Fee & Certified Copy |

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

| 1. N | ame of the limited liability company: DreamS | tuff | 2000 | LLC | | |
|----------|---|--------------------------|------------------------------|-------------------------------|--|-----------------------|
| 2. (a) | 1- | • | o) | , | | |
| (_, | Principal office address of limited liability company: | | | - | of limited liability con | |
| | (Note: MUST BE STREET ADDRESS) | | 10:11 | Orichias | <u>BE POST OFFICE I</u> 소구 | <u>50.1</u>) |
| | TUZ Grang CI | | → 1 1 | 1121116 | VII DIDD | |
| | Temple Terrace F1 33617 | | Colle | nwood | , AL 3632 | 40 |
| | 5-9-2001 | | LOIDO | 000753 | 325- 2 | |
| 3. | Date of filing/registration in Florida | - 4. | 2.0100 | Document nu | ımber | -3 |
| 5. (a) | Donald Ostrander | | | | DEC. | , |
| J. (4) | Registered Agent and Registered Office shown on the records o | I the Florida | a Dept. of State | : :: | | [7] |
| | | | | | 7: 0 | ご |
| | Registered Office Address (MUST BE FLORIDA STREET | ADDRESS | <u> </u> | | E GALL | |
| | 702 Grand Ct | | | | ģ. L | |
| | Temple Terrace, F | L_336 | .17 | | | |
| | 0.1 + m | | | | | |
| (b) | Enter name of NEW Registered Agent and/or NEW Registered | d Office ad | draw | | | |
| | Enter hance of NEW Registered Agent and/or NEW Registered | u Omce au | aress. | | | |
| | 702 Grand Ct | | | | | |
| | NEW Registered Office Address: | | | | | |
| | | | | , | | |
| | T) — | _ | | | | |
| | lemple Terrace Fi | L <u>33(</u> | 017 | | | |
| If the 1 | imited liability company is not organized under the la | ws of the | State of Flo | orida, it is here | eby confirmed tha | at after |
| | ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited I | | | | | |
| was/w | ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the | of the lim | ited liability | company or | | |
| the lift | 1-HR OT. 1 | | Donald | المرازية | ndor | |
| Signa | ture of a member or authorized representative of a member | | <u> TÜİTÜLU</u> | Printed or typed | I name of signee | |
| I here | by accept the appointment as registered agent and agions of all statutes relative to the proper and complete | ree to act | t in this cape | icity. I furthe | er agree to comple om familiar with a | v with the |
| the obl | ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I | ed for in (hereby co | Chapter 605 onfirm that t | , F.S. Or, if the limited lia | his document is b bility company h | eing filed as been |
| notifie | d in setting of this change. | | <i>y</i> | | | |
| Signatu | in of Registered Agent | | | | | |

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

INHS18 (2/14)