

L04000038/23

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

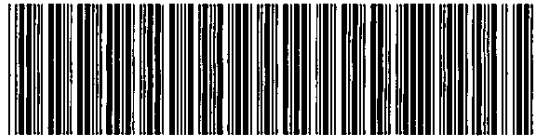
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FILED
09 AUG 10 PM 3:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. HAWKES

AUG 13 2009

EXAMINER

LAW OFFICES OF
NICOLA L. ZAGAROLO & ASSOCIATES, P.A.
Attorneys and Counselors at Law

BROWARD
TELEPHONE: (954) 786-0360
FAX: (954) 786-0331

**3800 NORTHEAST THIRD AVENUE
POMPAÑO BEACH, FLORIDA 33064**

PALM BEACH
TELEPHONE: (561) 750-7511
FAX: (561) 750-4644

August 5, 2009

Via U.S. Mail

Department of State
Division of Corporations
PO Box 6327
Tallahassee, Florida 32314

**RE: Amendment to the Articles of Organization
Dreamlink Holdings, LLC
Florida Document Number L04000038123**

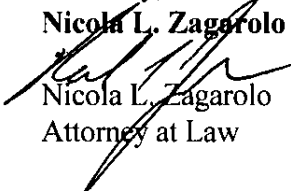
To whom it may concern:

Enclosed please find the Cover Letter and one original executed Amendment to Articles of Organization for **Dreamlink Holdings, LLC**, a Florida Limited Liability Company, Florida Document Number L04000038123. Further, I have also enclosed our check made payable to the Florida Department of State in the amount of \$25.00 as payment for the filing fee for said Amendment

In closing, I ask that you carefully review the enclosed documents and immediately contact me at the above Pompano Beach address and telephone number with any questions or comments regarding same. If all is in order, kindly return the requisite documents, if any, to our Pompano Beach Office once same have been processed and filed.

I thank you for your anticipated cooperation and ask that you contact my office if I may be of any further assistance.

Sincerely,
Nicola L. Zagarolo & Associates, P.A.


Nicola L. Zagarolo
Attorney at Law

Enclosures.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Dreamlink Holdings, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Nicola L. Zagarolo, Esq.
Name of Person

Nicola L. Zagarolo & Associates, P.A.
Firm/Company

3800 Northeast Third Avenue
Address

Pompano Beach, FL 33064
City/State and Zip Code

NZagarolo@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nicola L. Zagarolo, Esq. at (954) 786-0360
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Dreamlink Holdings, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
09 AUG 10 PM 3:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 05/20/2004 and assigned
Florida document number L04000038123.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

3415 Galt Ocean Drive

Number 260

Fort Lauderdale, FL 33308

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3415 Galt Ocean Drive

Number 260

Fort Lauderdale, FL 33308

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

, Florida

City

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

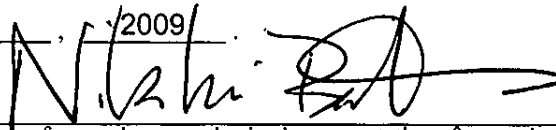
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

The Address for Manager and Member Nikolai Battoo is amended to be the
following: 3415 Galt Ocean Drive, Number 260, Fort Lauderdale, FL 33308

Dated June 30

2009


Signature of a member or authorized representative of a member

Nikolai Battoo, Member

Typed or printed name of signee