

L08000009123

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

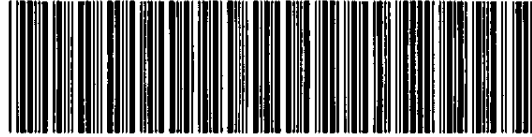
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Handwritten notes in the special instructions box, including "1-11-15" and "Amend".

Office Use Only



900268546219

~~L07-44912~~
Amend

02/02/15--01015--012 **43.75

L08-9123

FILED
15 MAR -2 PM 1:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 3 - 2015

N. CAUSSEAU

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: DREAM HOUSE GROUP, LLC

DOCUMENT NUMBER: _____

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JAE HONG
Name of Contact Person

DREAM HOUSE SERVICES, INC
Firm/ Company

P.O. BOX 607100
Address

ORLANDO, FL 32860
City/ State and Zip Code

JAE.HONG@DREAMHOUSEHOLDINGS.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JAE HONG at (407) 489-3223
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
|--|---|---|--|

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 10, 2015

JAE HONG
DREAM HOUSE SERVICES, INC.
P.O. BOX 607100
ORLANDO, FL 32860

SUBJECT: DREAM HOUSE GROUP, LLC
Ref. Number: L07000044912

We have received your document for DREAM HOUSE GROUP, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Nanette Causseaux
Regulatory Specialist II Supervisor

Letter Number: 315A00002757

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Dream House 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:

Jae Hong
Name of Person
Dream House Holdings, LLC
Firm/Company
P.O. Box 607100
Address
Orlando, FL 32860
City/State and Zip Code
jae.hong@dreamhouseholdings.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jae Hong at (**407**) **489-3223**
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$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**

Dream House Holdings, LLC

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

FILED
15 MAR 22 PM 1:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 01/25/2008

Florida document number L08000009123

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:

6724 Brittany Chase Court

(Principal office address MUST BE A STREET ADDRESS)

Orlando, FL 32810

Enter new mailing address, if applicable:

P.O. Box 607100

(Mailing address MAY BE A POST OFFICE BOX)

Orlando, FL 32860

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

MGR = Manager

AMBR = Authorized Member

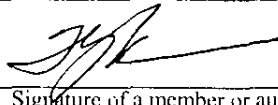
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	THOMPSON, LYNN A	501 S. KIRKMAN ROAD, SUITE 616679	<input type="checkbox"/> Add
		ORLANDO, FL 32861	<input checked="" type="checkbox"/> Remove
MGRM	HONG, JAE	P.O. Box 607100	<input checked="" type="checkbox"/> Add
		Orlando, FL 32860	<input type="checkbox"/> Remove
MGRM	HONG, JAE	1583 E. SILVER STAR RD., STE. 209	<input type="checkbox"/> Add
		OCOE. FL 34761	<input checked="" 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.)*

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated February 20 2015



Signature of a member or authorized representative of a member

Jae Hong

Typed or printed name of signee

Page 3 of 3
Filing Fee: \$25.00

FILED
15 MAR -2 PM 1:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA