

LU8000043212

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

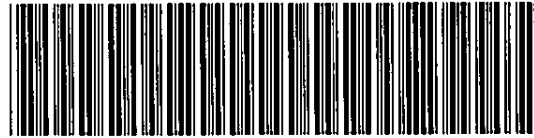
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B. KOHR



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03/29/13--01005--019 **25.00

RECEIVED
13 MAR 29 AM 11:39
TALLAHASSEE, FLORIDA

FILED
13 MAR 29 AM 10:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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WALK IN

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3/29 Linda

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LLC Amend

FILED
13 MAR 29 AM 10:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1.

Classic Dream LLC

(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

CLASSIC DREAM LLC

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

FILED
13 MAR 29 AM 10:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 1/15/13 and assigned
Florida document number 208000043212

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)

300 2ND AVE. #15
ST PETERSBURG FL. 33701

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

RAUL H T SNYDER

New Registered Office Address:

300 2ND AVE. #15

Enter Florida street address

ST PETERSBURG
City

Florida FL 33701
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.

[Signature]
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

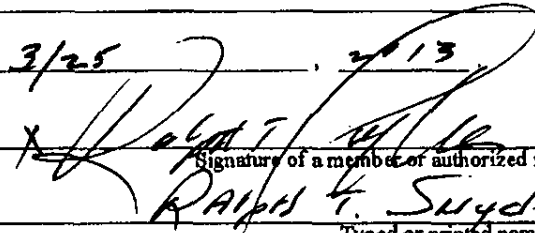
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>Pres.</u>	<u>Elizabeth</u>	<u>PO Box 76315</u>	Add
	<u>LUDWISZEWSKI</u>	<u>St Petersburg FL 33734</u>	Remove ✓
<u>Pres.</u>	<u>Ralph Snyder</u>	<u>300 2ND Ave. #15</u>	Add ✓
		<u>St Petersburg FL 33701</u>	Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove
	<u>3/25/13</u>		Add
			Remove

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

Dated

3/25

2013



Signature of a member or authorized representative of a member

RAIPHS E. SNYDER

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00