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SECRETARY OF STATE TALLAHASSEE, FLORIDA

APPROVED AND FILED

D. BRUCE
JUL 1 8 2012
EXAMINER

COVER LETTER

	egistration Section ivision of Corporations		
SUBJECT	DREAMTIME DIVING LLC		
South	Name of Limited Liability Company		
The enclos	ed Articles of Amendment and fee(s) are submitted for filing.		
Please retu	rn all correspondence concerning this matter to the following:		
	Joseph S. Kayne, Esq. Name of Person		
	Hardt, Stern & Kayne, P.C.		
	Firm/Company		
	2610 Lake Cook Road, #200		
	Address	CRETZ LAHA	>
	Riverwoods, IL 60015		FA
	City/State and Zip Code		
	kaynephoto@aol.com	1.5 1.9 1.9	ר
	E-mail address: (to be used for future annual report notification)	AM 9: 54 OF STATE ELFLORID	
For further	information concerning this matter, please call:	F	
	Joseph S. Kayne, Esq. at (847) 597-2150		
	Name of Person Area Code & Daytime Telephone Number		
Enclosed i	s a check for the following amount:		
\$25.00	Filing Fee Sand Filing Fee San		

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

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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

DREAMPIME DIVING LLC			
(Name of the Limited Liability Company as it now (A Florida Limited Liability Con	appears on our records.)		
(A Fiorida Elithica Etablity Con	ipany)		
The Articles of Organization for this Limited Liability Company were filed	on11/13/2008 and assigned		
Florida document number L08000105920			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability compa	ny here:		
The new name must be distinguishable and end with the words "Limited Liability "L.L.C."	Company," the designation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
	<u> </u>		
·	ART ME		
Enter new mailing address, if applicable:	AR SS		
(Mailing address MAY BE A POST OFFICE BOX)			
	(0)		
			
B. If amending the registered agent and/or registered office addre	[]		
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 Title Name Address Type of Action MGRM Honto, MC 1720 N. Cleveland Add Chicago, IL 60614 ____ Remove Jonathan Gaza MCRM 222 N. Palmway Lake Worth, FL MGRM Kristine Gaza 222 N. Palmway Lake Worth, FL MGR Jonathan Gaza 222 N. Palmway Lake Worth, FL ∏.\dd _□Remove D. If amending any other information, enter change(s) here: (Anach additional sheets, if necessary.) After the above changes occur, Honto, LLC shall be the sole member of the Company and Jonathan Gaza shall be the manager of the Company 2010 Dated July ember or authorized representative of a member

> Page 2 of 2 Filing Fee: \$25.00

han Gaza, MCRM Typed or printed name of signee