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(Requestor's Name)						
(Address)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
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C. GOLDEN AUG - 9 2019

COVER LETTER

INHS18 (2/14)

TO:	Registration Section Division of Corporations						
SUBJECT: Dream Come True Ent. LLC Name of Limited Liability Company							
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.							
Please return all correspondence concerning this matter to the following:							
Richa	ard D White						
-	Name of Person		•				
Dream Come True Ent. LLC							
	Firm/Company		•				
3517	Ralston Rd						
	Address		•				
Plant	City, FL 33566						
	City/State and Zip Code		•				
Rickw	vebb89@icloud.com						
E-mail address: (to be used for future annual report notification)							
For fur	rther information concerning this matter, p	lease call:					
		813 at (455-7304				
	Name of Person	. \	Area Code & Daytime Telephone Number				
	STREET/COURIER ADDRESS: Registration Section		LING ADDRESS: stration Section				
	Division of Corporations		ion of Corporations				
	Clifton Building		Box 6327				
	2661 Executive Center Circle Tallahassee, Florida 32301	Talla	hassee, Florida 32314				
	Enclosed is a check for the following amount:						
	■ \$25 Filing Fee	□ \$55	Filing Fee & Certified Copy				

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. Na	ame of the limited liability company: DREAM COME	TRUE ENTERPF	RISES LLC			
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited (Note: MAY BE POST	liability company:		
	5737 Lazy Creek Dr					
	Lakeland, FL 33811					
	09/28/11	L110	000111069	i		
3.	Date of filing/registration in Florida	4.	Document number			
5. (a)	Jennifer L White					
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:					
	Registered Office Address (MUST BE FLORIDA STREET					
	5737 Lazy Creek Dr	····		201		
	Lakeland, FI	L <mark>3381</mark> 1		2019 AUG		
(b)	Richard D Webb		•	2		
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>					
			• •	6: 10 E: 10		
	NEW Registered Office Address:					
	3517 Ralston Rd					
	Plant City	33566		1		
the cha agent was/w	imited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited I ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	f the registered iability compan of the limited li	office and the business offi y, it is hereby confirmed the iability company or as other	ce of the registered at the change(s)		
	ture of a member of authorized representative of a member		Printed or typed name of	White		
I here provise the obj to mer	by accept the appointment as registered agent and agions 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 d in writing of this change.	ree to act in the e performance of ed for in Chapte hereby confirm	is canacity. I further agree	to comply with the		
Signatu	ire of Registered Agent					

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