

L120000031609

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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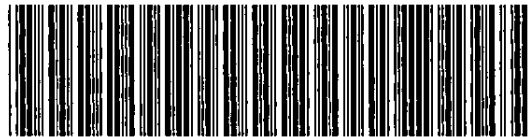
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

10/29/12--01017--024 **25.00

J. BRYAN

OCT 30 2012

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Dream It Do It 123, 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:

Anthony P Evans
Name of Person
Dream It Do It 1-2-3, LLC
Firm/Company
2426 E. 7th Ave
Address
Tampa, FL 33605
City/State and Zip Code
evanstony@aol.com
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Anthony P Evans at (**813**) **247-1563**
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 It Do It 123, LLC

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

March 5, 2012

The Articles of Organization for this Limited Liability Company were filed on _____ and assigned
Florida document number L12000031609.

This amendment is submitted to amend the following:

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

Dream It Do It 1-2-3, LLC

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)

2426 E. 7th Ave.

Tampa, FL 33605

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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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: Anthony P Evans

New Registered Office Address: 2426 E 7th Ave

Enter Florida street address

Tampa
City

Florida

33605
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.

Anthony P Evans
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> |
|--------------|----------------|---|--|
| MRGM | Brian P Fuller | P.O. Box 2886 Ormond Beach, FL 32175 | <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

The addresses for the other managing members: _____

MGRM Ian Pickett 8621 Fancy Finch Dr. #102 Tampa, FL 33614 _____

MGRM Anthony Evans 8621 Fancy Finch Dr. #102 Tampa, FL 33614 _____

MGRM Peggy Evans 8621 Fancy Finch Dr. #102 Tampa, FL 33614 _____

Dated October 20, 2012

Signature of a member or authorized representative of a member

Typed or printed name of signee