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COVER LETTER

Division of Corporations
SUBJECT: Dreamworld Plumbing Repairs & Bathron Remodeling 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:
Causey Bryant, JR. Name of Person
Dreamworld Humbing Repairs & Bathram Remodeling LIC'
16131 NW 1844 Are Address
Opa Locka, 7L 33054 City/State and Zip Code
Dreamworld realestate investments Q, Yahu. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Causey Bryan+, JR. at 305 310-6235 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$30.00 Filing Fee & S60.00 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

Dreamworld Real Estate Investme	my as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number $L1200032973$.	were filed on March 8, 2012 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	
Dreamworld Plumbing Repairs & Bathr The new name must be distinguishable and contain the words "Limited Liabil	nor Remadeling LLC lity 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)	16131 NW 18th Ave Opa Locka, 7L 33054
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	2
B. If amending the registered agent and/or registered of 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 Zin 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
9MBR	Fulton Knya Wette	104 McCargo Street Non Jacksonville, 7L 3222	46, □ Add
		Jacksonville, 7L 3222	O Br Remove
			Change
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D. If amending	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(If an effective of Note: 1f the	date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3) date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the effective date on the Department of State's records.
	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: a day after the record is filed.
Dated <u>No</u>	ovember 9 . 2019.
	Signature of a member or outhorized representative of a member
	Causey Bryant, IR. Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00