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SECACTARY OF STATE OF DIVISION OF CORPORATIONS

C. LEWIS NOV 2 1 2012

EXAMINER

COVER LETTER

Division of Corporations
SUBJECT: <u>CLUB</u> DREAM, 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:
AN thony Comparetto Esq.
Name of Person
Firm/Company
St. letersung, FZ 33707
Address
St. letersburg, 72 33707
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
As though tompretto and 228 7900
Anthory Conferento at (727) 328-7900 Name of Person Area Code & Daytime Telephone Number
And Code to Daytino Polephole Pulling
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee,
Certificate of Status Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
MAILING ADDRESS: STREET/COURIER ADDRESS:
Registration Section Division of Corporations Registration Section Division of Corporations
P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO

ARTICLES OF ORGANIZATION

SECRETARY OF STARL BIVISION OF CORPORALISM

2812 NOV 20 PM 12: 45

CLUB DREAM, A	140					
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)						
The Articles of Organization for this Limited Liability Company Florida document number	y were filed on MARCA	23 2012 and assigned				
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited liab	oility company here:					
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company," th	e designation "LLC" or the abbreviation				
Enter new principal offices address, if applicable:	<u> </u>					
(Principal office address MUST BE A STREET ADDRESS)						
		·				
Enter new mailing address, if applicable:						
(Mailing address MAY BE A POST OFFICE BOX)						
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		cords, enter the name of the new				
Name of New Registered Agent:						
New Registered Office Address:	Fnior Fle	rida street address				
	Emer rio					
 	City	, Florida 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 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:

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Russell A. BRUNO	1902 Bost 7 Ave Tampa FL 33605	Add Remove
MGR	KARLA. J. BREWER	1902 EAST 7 AVE JAMPA FZ 33605	Add Remove
			Add Remove
		,	Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	
			SEERETARY I SEERETARY I SIVISION OF CO.
	11-14.2012	2-	TORFORMER O PHIZ: 45

Page 2 of 2

Filing Fee: \$25.00