

L14000184698

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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16 APR 21 PM 1:41
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APR 22 2016
Y SULKER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 1, 2016

LES BROWN
1514 MAX HOOK ROAD SUITE B
GROVELAND, FL 34736

SUBJECT: DREAMERS AUTO BROKERS LLC
Ref. Number: L14000184698

We have received your document for DREAMERS AUTO BROKERS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 416A00006718

COVER LETTER

Attention:
Jesamine or Yessamine

TO: Registration Section
Division of Corporations

SUBJECT: Dreamers Auto Brokers 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:

Les BROWN
Name of Person

Dreamers Auto Brokers LLC
Firm/Company

863 N. US Highway 17-92 Suite A
Address

Longwood, FL 32750
City/State and Zip Code

les@dreamersautobrokers.com
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 APR 22 AM 11:24

For further information concerning this matter, please call:

Les BROWN at (321) 369-8479
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**

(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 were filed on 12/03/14 and assigned
Florida document number L14000184698.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain 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)

863 N. US Highway 17-92
Suite A
Longwood, FL 32750

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

863 N. US Highway 17-92
Suite A
Longwood, FL 32750

**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: _____

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 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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Les BROWN	2797 Picadilly Circle	<input checked="" type="checkbox"/> Add
		Kissimmee, FL 34747	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Tammy BROWN	2797 Picadilly Circle	<input checked="" type="checkbox"/> Add
		Kissimmee, FL 34747	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Giorgio Aristo	1310 GOLF VIEW Drive	<input checked="" type="checkbox"/> Add
		Belleair, FL 33756	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

13 APR 21 PM 4:41
HARRIS COUNTY, TEXAS

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Please make sure Les BROWN, Tammy Brown
and Giorgio Aristo are the only 3
Authorized members on the record.
You already received payment of 35.00
From us but it was not Filed because we
Sent the wrong form with the payment.

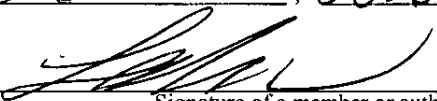
E. Effective date, if other than the date of filing: _____ (optional)

(If an effective 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)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated April 6, 2016.



Signature of a member or authorized representative of a member

Les Brown

Typed or printed name of signee