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MAY 2 8 2015

COVÉR LETTER :

TO: Registration Section Division of Corporations
SUBJECT: Dream Achievers Academy of Leadership, 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:
Maria M Dawkins - Bowie Name of Person
Dream Achievers Academy of Leadership, LLC
2775 NW 46 Street Address
Miami, FL. 33142 City/State and Zip Code
E-mail address: (to be used for fiture annual report notification)
For further information concerning this matter, please call:
Maria Dawkins - Bowie at (305) 635 - 0556 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:

□ \$55.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

□ \$25.00 Filing Fee

\$30.00 Filing Fee &

Certificate of Status

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

□ \$60.00 Filing Fee,

Certificate of Status & Certified Copy (additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Dream Achievers Academ (Name of the Limited Liability Comp (A Florida Limited	any of Leadership, LaC is any as it now appears on our records!) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L\S \O \phi \phi \Phi \Phi \Phi \Phi \Phi \Phi \Phi \P</u>	M. P. 20
The new name must be distinguishable and contain the words "Limited Liab Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	ility Company," the designation "LLC" or the abbreviation "L.C." 2775 NW 46 Street Miami, FL. 33142
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2775 NW 46 Street Miami, FL. 33142
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address here.	office address on our records, <u>enter the name of the new</u>
New Registered Office Address: 2775	NW 46 Street Enter Florida street address City The Dawkins - Bowie NW 46 Street Enter Florida Street address 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.

Mua M. Dawk Signature of New Helpistered 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 Title <u>Name</u> <u>Address</u> **Type of Action** MAR Maria M Dawkins-Bowie 2775 NW 46 Street - Add Miami, Fl. 33142 □ Remove Change □ Remove ☐ Change □ Add ☐ Remove

☐ Change

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fan ei Note:	tive date, if other than the date of filing:
	ecord specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlier of $0:00$ 00000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 00000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 00000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 00000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000 $0:00$ 000000 $0:00$ 000 $0:00$ 0000 $0:00$ 0000 $0:00$ 0000 $0:00$ 0000 $0:00$ 0000 $0:00$ 0000 $0:00$ 0000 $0:00$ 0000 $0:00$ 0000 $0:00$ 0000000000
	Maria M. Day Less Bowless Bowl
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Filing Fee: \$25.00