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| (Re | equestor's Name) | |
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| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

`TO: Registration Section Division of Corporations

American Dream 77 LLC

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SUBJECT:

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:

Michelle Davenport

| | | Name of Person | |
|-----------------------------|---------------------------------|--|---|
| | American Dream 77 LLC | | <u> </u> |
| | | | |
| | | Firm/Company | |
| | 1841 NW 24th Terrace | | · · · · · |
| | | | 1 (T) |
| | - | Address | ي ج ع رو ج ع رو ج ع |
| | Fort Lauderdale FI 33311 | | |
| | | | ر ک دن. |
| | americandream0077@gma | City/State and Zip Code il.com | 7- |
| | E-mail address: (| to be used for future annual report potifi | cation) |
| For further information c | oncerning this matter, please c | all: | |
| Michelle Davenport | | · 생종 368-5703 at (95억) | |
| Name o | f Person | | Telephone Number |
| Enclosed is a check for the | e following amount: | | |
| □ \$25.00 Filing Fee | ■ \$30.00 Filing Fee & | □ \$55.00 Filing Fee & | □ \$60.00 Filing Fee. |
| | Certificate of Status | Certified Copy | Certificate of Status & |
| | | (additional copy is enclosed) | Certified Copy (additional copy is enclosed) |
| | | | |
| | ING ADDRESS: | STREET/COURIE | R ADDRESS: |
| | ation Section | Registration Section | |
| | n of Corporations ox 6327 | Division of Corpora Clifton Building | uons |
| | ssee, FL 32314 | 2661 Executive Cen | ter Circle |

Tallahassee, FL 32301

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TO ARTICLES OF ORGANIZATION OF

| a <mark>ny as it now appears on ou</mark> Liability Company) | ir records.) |
|---|---|
| y were filed on | 15 and assigned |
| | |
| bility company here: | |
| | |
| oility Company," the designati | ion "LLC" or the abbreviation "L.L.C." |
| N/A | |
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| office address on our <u>re</u> : | records, enter the name of the r |
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| | |
| Enter Florida stre | et address |
| | . Florida |
| | y were filed on |

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

| <u> Title</u> | <u>Name</u> Andrew Jeweii | Address | Type of Action |
|---------------|------------------------------|---|-------------------|
| MGR | | | 🖸 Add |
| | | 7930 Nobhill Road Tamarac Fl 33321 | Remove |
| | Ryan Aponte | | Change |
| VP | · · · | | 🗆 Add |
| | | 79 Red Jacket Parkway Buffalo NY 14220 | Remove |
| | | | Change |
| | | | Add |
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We would like the following removed from the original Articles of Incorporation they are no longer associated with the company:

Ryan Aponte (VP)

Andrew Jewell (MGR)

Can the Articles please be updated so that I could provide proof of removal of those authorized persons

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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 tiling or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) <u>Note:</u> 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.

| April 5th ed | 2019 | |
|-----------------|---|----------|
| D | , | |
| Muchael 1 | | |
| Town white | Signature of a member or authorized representative of | a mumbar |

Michelle Davenport

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00