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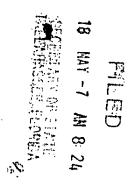
(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO:		Section Corporations		·		
em		ISTONE INVESTMENTS, LLC				
Name of Limited Liability Company						
The	enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.			
Plea	ase return all corre	spondence concerning this matter	to the following:	•		
		Vehano Joseph				
			Name of Person			
		DREAMSTONE INVEST	MENTS, LLC			
			Firm/Company			
		717 N Himes Avenue				
			Address	v** 1811.8		
		Tampa, FL. 33609				
			City/State and Zip Code			
		Info@dreamstoneinvest.com				
		E-mail address: (to be used for future annual report no	tification)		
For	further informatio	n concerning this matter, please ca	all:			
Vel	nano Joseph		954 2960539 at ()			
	Nan	ne of Person	Area Code Dayti	me Telephone Number		
Enc	closed is a check for	or 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 Fec, Certificate of Status & Certified Copy (additional copy is enclosed)		

TO:

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

DREAMSTONE INVESTMENTS, LL		
(Name of the Limited I (A l	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liabi Florida document number L18000076748		and assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	e limited liability company here:	题 表 高
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "LLC" or	the abbreviation "L.L.O."
Enter new principal offices address, if applicable		8 2
(Principal office address MUST BE A STREET A	(DDRESS)	- 12 - 12 - 12 - 12 - 12 - 12 - 12 - 12
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Enter r toriaa street address	
-	, Floric	
	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, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Confessa & Company R	29/E/10/C 1/LU 3913 S Trask ST, Tampa FL 33611	
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			Change
 			Add
		· ·	□ Remove
			☐ Change
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			☐ Remove
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		-	□ Remove
			Change
			Add
			☐ Remove
			☐ Change

	f Contessa & Company Real Estate, LI	
		·
-		
		
,		
fective date, if other tha	n the date of filing:	(optional)
an effective date is listed, the da ote: If the date inserted in t	e must be specific and cannot be prior to dat his block does not meet the applicable:	e of filing or more than 90 days after filing.) Pursuant to 605.02 statutory filing requirements, this date will not be listed
ocument's effective date on	the Department of State's records.	
erecord specifies a del The 90th day after the		effective time, at 12:01 a.m. on the earlier
The source and area are		
MAY 3	2018	
(We ren	l-
	48 ren	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00