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(R	equestor's Name)	
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## **COVER LETTER**

TO: Registration Section Division of Corporation			
1	ا ماک ا برامه ا	( )	
SUBJECT:	IDECTY LOAD, C		
1	Name of Lim	ned Liability Company	
The enclosed Articles of Am	nendment and fee(s) are sub-	mitted for filing.	
Please return all corresponde	ence concerning this matter	to the following:	
	<u>-</u>	-	
l	Nicholas	Contessa	
		Name of Person	
	Dreamstone	Investments, UC Firm/Company	
I		Firm/Company	
I	717 N	Himes Ave	
		Himes Ave Address	
	Tama	FL 33609	
	Tampa	FL 336 09 City/State and Zip Code	<del></del>
-		wstone invest. com	
	e-man address. (t	to be used for future aimual report factific	Lations
For further information conc	erning this matter, please ca	ill:	
Nicholas Co	ntessa	at (239 ) 470 - 3	3182
Nichdas Co	rson	at ( 239 ) 470 - 3 Area Code Daytime	Telephone Number
		·	•
Enclosed is a check for the fo	ollowing amount:		
<b>☒</b> \$25.00 Filing Fee 1	E\$30.00 Filing Fee &	<b>№</b> \$55.00 Filing Fee &	\$60.00 Filing Fee,
and and an initial an	Certificate of Status	Certified Copy	Certificate of Status &
		(additional copy is enclosed)	Certified Copy
1			(additional copy is enclosed)
	G ADDRESS:	STREET/COURIE	R ADDRESS:
Registratio		Registration Section	
Division o P.O. Box 6	f Corporations	Division of Corporat Clifton Building	tions
	e, FL 32314	2661 Executive Cent	ter Circle

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Liberty Lofts, LLC				
(Name of the Limited Liability Company as (A Florida Limited Liabili	it now appears on our records.) ty Company)			
The Articles of Organization for this Limited Liability Company were Florida document number <u>L.18000 \\5880</u>	filed on 05/08/2018	and	d assigr	ied
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liability	company here:			
Drew Park Gardens, LLC				
The new name must be distinguishable and contain the words "Limited Liability Co	ompany," the designation "LLC" or the	abbreviatio	n "L.L.C	r.
Enter new principal offices address, if applicable:	4611 N. Hubert	Ave		
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Tampa, FL 33614				
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)			-	
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	address on our records, ente	r-the na	me of	the nev
Name of New Registered Agent:		, i	23	i
New Registered Office Address:		73.	À	
	Enter Florida street address	-3.50	8: 07	
<del></del>	, Florida _	i Zip C		
New Registered Agent's Sanature if changing Registered Agent:	riih	∠ıp ⊂	our	

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

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n effective date ote: If the dat	if other than is listed, the date in inserted in this ctive date on the	must be specific s block does n	and cannot be a of meet the ap	plicable statutor	ng or more than 90 da y filing requiremen	(optional) sys after filing.) Purints, this date will	suant to 605.02 not be listed
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