

L18000248584

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(Address)

(Address)

(City/State/Zip/Phone #)

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05/16/25--01029--004 **60.00

2025 MAY 16 PM 1:54

cf 7/14/2025

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AMERICAN DREAM CPA PLLC

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:

ADRIAN KEITH SKANE

Name of Person

AMERICAN DREAM CPA PLLC

Firm/Company

18118 Courtney Breeze Dr

Address

TAMPA, FL 33647

City/State and Zip Code

KEITH@AMERICAN DREAMCPA.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Adrian K Skane

Name of Person

at (619) 742-4450

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

AMERICAN DREAM CPA PLLC

2025 MAY 16 PM 1:54

(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 11/19/2018 and assigned
Florida document number 118000268584.

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:

2202 N West Shore Blvd Suite 200-1170

(Principal office address MUST BE A STREET ADDRESS)

18118 Courtney Breeze Dr

Enter new mailing address, if applicable:

18118 COURTNEY BREEZE DR

(Mailing address MAY BE A POST OFFICE BOX)

TAMPA, FL 33647

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:

ADRIAN KETH SKANE

New Registered Office Address:

18118 COURTNEY BREEZE DR

Enter Florida street address

TAMPA

City

Florida 33647

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

AKS

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>
MGR	PALADIN WEST LLC	1212 S KEEN RD	☐ Add
		CLEARWATER, FL 33756	☒ Remove
			☐ Change
MGR	NEVER BETTER CONSULTING	1212 S KEEN RD	☐ Add
		CLEARWATER, FL 33756	☒ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
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			☐ Add
			☐ Remove
			☐ Change

all

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(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)

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.

Signature of a member or authorized representative of a member

Typed or printed name of signee

AK