L19 000 272837

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



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JAN 2 8 2020 S. YOUNG

COVER LETTER

| | Registration Section Division of Corporations | | | | | | | |
|-----------|--|--|--|--|--|--|--|--|
| SUBJEC | DREAM LUX INVESTMENTS LLC | | | | | | | |
| SOBSE | | Name of Limited I | Liability Company | | | | | |
| Dear Sir | or Madam: | | | | | | | |
| The encl | osed Registered Agent/Registered | l Office Change and | I fee(s) are submitted for filing. | | | | | |
| Please re | eturn all correspondence concerni | ng this matter to the | following: | | | | | |
| JERRY (| OSBORNE | | | | | | | |
| | Name of Person | - | | | | | | |
| DREAM | LUX INVESTMENTS LLC | | | | | | | |
| | Firm/Company | | | | | | | |
| 1721 SC | OUTHEAST 17TH STREET | | | | | | | |
| | Address | | - | | | | | |
| FT LAU | DERDALE FLORIDA 33316 | | | | | | | |
| | City/State and Zip Co | ode | | | | | | |
| TAXES@ | DAYRTS.BIZ | | | | | | | |
| E-1 | mail address: (to be used for future | e annual report noti | fication) | | | | | |
| For furth | er information concerning this ma | atter, please call: | | | | | | |
| JERRY (| OSBORNE | 443 | 744-1880 | | | | | |
| _ | Name of Person | \ | Area Code & Daytime Telephone Number | | | | | |
|]] | Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314 | | Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 | | | | | |
| 1 | Enclosed is a check for the follow | wing amount: | | | | | | |
| í | 2 \$25 Filing Fee | Name of Limited Liability Company adam: Registered Agent/Registered Office Change and fee(s) are submitted for filing. all correspondence concerning this matter to the following: DRNE Name of Person INVESTMENTS LLC Firm/Company EAST 17TH STREET Address PALE FLORIDA 33316 City/State and Zip Code RTS.BIZ ddress: (to be used for future annual report notification) formation concerning this matter, please call: DRNE Area Code & Daytime Telephone Number ng Address: Registered Agent/Registered Office Change and fee(s) are submitted for filling. all (1) Area Code & Daytime Telephone Number Registration Section Division of Corporations Box 6327 The Centre of Tallahassee 3215 N. Monroe Street, Suite 810 Tallahassee, FL 32303 | | | | | | |

INHS18 (2/14)

- STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

| | me of the limited liability company: DREAM LUX IN 1721 SOUTHEAST 17th STREET | | 1721 S | OUTHEAST 17th STR | REET | | |
|---|--|---|---|---|-----------------------------|---------------------------|---|
| . (a) | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) FT LAUDERDALE | (| (b) | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) ERDALE | | | |
| | FL 33316 | | FL 3331 | 16 | | | |
| | OCTOBER 31, 2019 | | L190002 | 72837 | | | |
| (a) | Date of filing/registration in Florida JERRY OSBORNE | 4. | | Document number | | | |
| (a) | Registered Agent and Registered Office shown on the records of 710 N CHAPELGATE LANE | the Florid | ia Dept. of St | tate: | | | |
| | Registered Office Address (MUST BE FLORIDA STREET 1721 SOUTHEAST 17th STREET | <u>AD</u> DRES | <u></u> | | | | |
| | FT LAUDERDALE FI | 33316 | | | | 19 DI | • - |
| (b) | Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> JERRY OSBORNE | i Office a | ddress: | _ | | 23 7 | - - -, |
| | NEW Registered Office Address: 1721 SOUTHEAST 17th STREET | <u> </u> | - | _ | | -1 | |
| | FT LAUDERDALE , FL | 33316 | _ | _ | | | |
| ange gent was/we e artic | mited liability company is not organized under the law or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited live authorized by an affirmative vote of the members of the operating agreement of the case of organization or the operating agreement of the case of a member or authorized representative of a member | register ability cof the lin limited | ed office a ompany, it nited liabil | and the business office is hereby confirmed t lity company or as oth ompany. | of the hat the erwise | regist chang provid | ered re(s) |
| heret rovisio e obli mere viified | by accept the appointment as registered agent and agroups of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, I if in writing of this change. | ee to ac perform d for in hereby c | t in this ca jance of my Chapter 60 onfirm tha | manatas (E. al | | , | rith the l accep ng filea been |
| | e of Registered Agent | | | | | | |