

L20 000028911

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

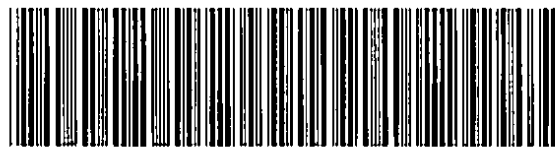
(Business Entity Name)

(Document Number)

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JUN 29 2020

SECRETARY OF STATE
TALLAHASSEE, FL

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D. BRUCE
AUG 12 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Dream Designers Travel, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Brandon Schukei

Name of Person

DreamVision Travel, LLC

Firm/Company

11523 Palmbrush Trail, Suite 189

Address

Lakewood Ranch, FL 34202

City/State and Zip Code

72brandon.s@gmail.com

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

For further information concerning this matter, please call:

Brandon Schukei

404

247-1871

at (_____) _____

Name of Person

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

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TALLAHASSEE, FL

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

Dream Designers Travel, LLC

(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 1/23/2020 and assigned
Florida document number L20000028911.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

DreamVision Travel, LLC

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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

11523 Palmbrush Trail

Suite 189

Lakewood Ranch, FL 34202

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:

Brandon Schukei

New Registered Office Address:

11702 Winding Woods Way

Enter Florida street address

Lakewood Ranch

Florida 34202

City

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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, 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	Brandon Schukei	11702 Winding Woods Way	<input checked="" type="checkbox"/> Add
		Lakewood Ranch, FL 34202	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	James Tarlton	11702 Winding Woods Way	<input type="checkbox"/> Add
		Lakewood Ranch, FL 34202	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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TALLAHASSEE FL

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SECRETARIAT OF STATE
TALLAHASSEE, FL

(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)

Dated June 23, 2020

James W. Partridge
Signature of a member

Signature of a member or authorized representative of a member

B. Schuler

James Tarlton

Brandon Schukei

Typed or printed name of signee

Filing Fee: \$25.00