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TO:			•	\$ *	
CHELL					
SUBJE	C1:	Name of Lim	ted Liability Company		
The enc	losed Articles of	berry Dream Builder LLC Name of Limited Liability Company ticles of Amendment and fee(s) are submitted for filing. correspondence concerning this matter to the following: Patricia Duberry Name of Person Duberry Dream Builder, LLC Firm/Company 10755 SW 155 Terrace Address Miami, Florida 33157 City/State and Zip Code PDDUBERRY319N@GMAH.COM E-mail address: (to be used for future annual report notification) mation concerning this matter, please call: Name of Person Area Code Daytime Telephone Number seek for the following amount: g Fee S30.00 Filing Fee & S55.00 Filing Fee & Certificate of Status & Certificate of Status & Certificate Copy (additional copy is enclosed) LAddress: Ration Section Street Address: Registration Section			
Please r	eturn all correspo	ondence concerning this matter	to the following:		
		Patricia Duberry			
			Name of Person		-
		Duberry Dream Builder, L	LC		
			Firm/Company		
		10755 SW 155 Terrace			
			Address		
		Miami, Florida 33157			
			•	•	_
	Division of Corporations Duberry Dream Builder LLC 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: Patricia Duberry Name of Person Duberry Dream Builder, LLC Firm/Company 10755 SW 155 Terrace Address Miami, Florida 33157 Gity/State and Zip Code PDDUBERRY319N@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Patricia Duberry 305 Area Code Daytime Telephone Number Enclosed is a check for the following amount: \$\begin{array}{c} \text{S25.00 Filing Fee} & \text{S35.00 Filing Fee} & \text{Certified Copy} & \text{Certified Copy} \ (additional copy is enclosed) Mailing Address: Street Address:				
For furt	her information c		·	,	
Patricia	Duberry				
	Name o	f Person	Area Code Daytin	ne Telephone Numbe	۲-
Enclose	d is a check for th	ne following amount:			
■ \$25	.00 Filing Fee		Certified Copy	Certific Certifie	ate of Status & d Copy
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Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Duberry Dream Builder, 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 $\frac{07-28-2020}{}$ and assigned Florida document number ______ L20000215803 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: P.D.J.D. Dream Builder, 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) 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: New Registered Office Address: Enter Florida street address

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.

Cirv

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>	Address	Type of Action
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Note: If	e date, if other than the date of filing:	
he record s ord is filed	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	ne
Dated	AVGUST ZLOZY.	
	Signature of a plember or authorized representative of a member	
	Typed or printed name of signed	