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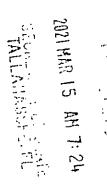
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COVER LETTER

SUBJECT: Dhrubo's Dream Enterprise, LLC Name of Limited Liability Company	<u></u>
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
MOHAMMED TORIK HOSSAIN Name of Person	
Dhrubo's Dream Enterprion, LLC Firm/Company	
1018 Hoover 55.	
Address	2021 SEG
melbourne, P1-32935	2021 HAR 15 AM 7: 24 SECHLAMASSEE, FIL
City/State and Zip Code	5
thossamo64@ smail com	
E-mail address: (to be used for future annual report notification)	四张 2
For further information concerning this matter, please call:	
Mohammed Hossain at 34, 863-2363	

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Name of Person

Street Address:

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

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

\$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

TO:

Registration Section Division of Corporations

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.

1. Name of the limited liability company: シケソンbで	o's dream e	nderprise	LLC	
		Hoover		
2. (a) 1018 Hower 64. Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(8) <u>1010</u>	Mailing address of	limited liability compare POST OFFICE BOX	_
melbourne A. 32935	- me	pareur f	7-32935	
August 12, 2020	L	_ Z0000	245 405	
3. Date of filing/registration in Florida	4.	Document num	ber	
5. (a) Chefenne Mosley U. Registered Agent and Registered Office shown on the records	5 608P A9	2-17-5		
		<u> </u>		
United States Corporation		- Inc		
Registered Office Address (MUST BE FLORIDA STREE				
5575 Semoran bly	4			
Orlando	FL 32822	_		
(b) Mohammed Tarric Hos	sain	_	2021 HAR 15 TALLAH	
Enter name of NEW Registered Agent and/or NEW Register			55 5	در ره مشد
1018 Hoover 6+		_	21 HAR 15 AM 7: 24 TALLANDSSELE FL	;-"]
NEW Registered Office Address:				2227
1018 Hoover St		_	: 24 Phi	
melbourne	FL 32935	_		
If the limited liability company is not organized under the leange or changes are made, the Florida street address of the agent will be identical. Or, in the case of a Florida limited was/were authorized by an affirmative vote of the members the articles of organization or the operating agreement of the	ne registered office a liability company, it s of the limited liabili	nd the business o is hereby confirm ty company or a	office of the register ned that the changet s otherwise provide	ed (s)
Signature of a member or authorized representative of a member	Moth	mm ED	HOSSAIN	
Signature of a member or authorized representative of a member	_	Printed or typed i	name of signee	
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and complet the obligations of my position as registered agent as provid to merely reflect a change in the registered office address, notified in writing of this change.	gree to act in this cap le performance of my led for in Chapter 60 I hereby confirm that	oacity. I further a duties, and I am 5, F.S. Or, if this the limited liabi	agree to comply wit familiar with and a s document is being lity company has he	th the accept filed en
Signature of Registered Agent				