

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000397666 3)))



H220003976663ABC8

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : DOCUMENT PLANET INC
Account Number : 120180000095
Phone : (305)510-3848
Fax Number : (786)789-2416

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: info@youndreamms.com

2022 NOV 22 AM 11:27
RECEIVED
DIVISION OF CORPORATIONS
FLORIDA DEPARTMENT OF STATE

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CREATIV3 SUPPLIES LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

NOV 28 2022

A. LUN

Electronic Filing Menu

Corporate Filing Menu

Help

(((H22000397666 3)))

COVER LETTER

(((H22000397666 3)))

TO: Registration Section
Division of Corporations

SUBJECT: CREATIV3 SUPPLIES 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:

JOAN ORLANDO GARCIA DOMINGUEZ

Name of Person

Joan Orlando Garcia Dominguez

Firm/Company

8020 NW 71ST ST

Address

MIAMI, FL 33166

City/State and Zip Code

joangar.jg@gmail.com

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

For further information concerning this matter, please call:

ISAMAR TORRES

786

660-0108

31 ()

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

(((H22000397666 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
CLERK OF COURT
JUDICIAL CIRCUIT IN AND FOR
THE COUNTY OF DADE, FLORIDA
(H22000397666 3))
2022 NOV 22 AM 11:27

CREATIV3 SUPPLIES 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 11/30/2020 and assigned
Florida document number L20000363679.

This amendment is submitted to amend the following:

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

N/A

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:

N/A

(Principal office address MUST BE A STREET ADDRESS)

N/A

N/A

Enter new mailing address, if applicable:

N/A

(Mailing address MAY BE A POST OFFICE BOX)

N/A

N/A

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:

ISAMAR TORRES

New Registered Office Address:

8300 NW 53RD ST STE 350

Enter Florida street address

MIAMI

City

Florida 33166

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.

((H22000397666 3)))

Isamar Torres
If Changing Registered Agent, Signature of New Registered Agent

((H22000397666 3))

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)* 2022

2022 NOV 22 AM 11:27

E. Effective date, if other than the date of filing: _____ (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (h) The 90th day after the record is filed

Dated NOVEMBER 22, 2022

Joan Orlando Garcia Dominguez
Signature of a member or authorized representative of a member

JOAN ORLANDO GARCIA DOMINGUEZ

Typed or printed name of signee

((H22000397666 3))

Filing Fee: \$25.00