L21000063522

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COVER LETTER

Registration Section Division of Corporations

TO:

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: BIGGEMANN, JORGE Name of Person	
Please return all correspondence concerning this matter to the following: BIGGEMANN, JORGE	
BIGGEMANN, JORGE	
Name of Person	
	Name of Person LC Firm/Company PT 606 Address 33146 City/State and Zip Code [AIL.COM] Strop used for future annual report notification) e call: T86 Area Code Daytime Telephone Number S55.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed) Street Address: Registration Section Division of Corporations The Centre of Tallahassee
DREAMY DRESSES LLC	
Firm/Company	
enclosed Articles of Amendment and fee(s) are submitted for filling. se return all correspondence concerning this matter to the following: BIGGEMANN. JORGE	
Address	يــ.
CORAL GABLES, FL 33146	17 N.C
City/State and Zip Code	-3 -2
and the second s	
E-mail address: (to be used for future annual report notification)	Pi
For further information concerning this matter, please call:	. ?
	; J
Enclosed is a check for the following amount:	
Certificate of Status Certified Copy Certificate of Statu (additional copy is enclosed) Certified Copy	
Registration SectionRegistration SectionDivision of CorporationsDivision of Corporations	
P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

'ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DREAMY DRESSES LLC		
(Name of the Limited Liabili (A Florida	ty Company as it now appears on our records.) a Limited Liability Company)	,
The Articles of Organization for this Limited Liability C	Company were filed on 02/05/2021	and assigned
Florida document number L21000063522	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
BIGGEMANN'S ADVISORS LLC		
The new name must be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC" of	or the abbreviationL.C."
Enter new principal offices address, if applicable:		
(Principal office <u>address MUST BE A STREET ADD</u> E	<u></u>	22
		7
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		- ni
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our records, <u>enter th</u>	e name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Flor	
	City	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.

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
			□Add
			□ Remove
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ective date, if other than the reflective date is listed, the date muster. If the date inserted in this blument's effective date on the D	t be specific and cannot ock does not meet the	applicable statute	ing or more than 90 da ry filing requireme	_(optional) ays after filing.) Pur ats, this date will	suant to 605.02 not be listed
ecord specifies a delayed effectiv is filed.	e date, but not an effe	ctive time, at 12:0	1 a.m. on the earlie	r of: (b) The 90	th day after th
05/11/2023 ted	- 12:0	I am			
					<u>.</u>
***	Signature of a member	or authorized repres	entative of a member		

Filing Fee: \$25.00