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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803

Fax Number

: (855)330-1010

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

Email Address:__

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN A 'DREAM COME TRUE TRUCKING LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

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M. SOLOWON

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Corporate Filing Menu

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A 'DREAM COME TRUE TRUCKING LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)		
(A Florida Limited Liability Company)		
The Articles of Organization for this Limited Liability Company were filed on 02/09/2021	_ and assign	ied
Florida document number L21000064488		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company here:		
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbre	eviation "L.L.C	· ,·
Enter new principal offices address, if applicable:	:	20;
(Principal office address MUST BE A STREET ADDRESS)		20 21 HAS
		35
		-
	11:	
Enter new mailing address, if applicable:	25.77	9
(Mailing address MAY BE A POST OFFICE BOX)		AK 9: 36
The state of the s	se nome of	the neu
B. If amending the registered agent and/or registered office address on our records, enter the registered agent and/or the new registered office address here:	re name or	tile jiew
Name of New Registered Agent:		
New Registered Office Address:		
Enter Florida street address		
PL-24.		

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	Daquaun Kerrion Edwards	6199 Erik Court	☑ Add
		Melbourne , Fl US 32940	☐ Remove
			Change
			Add
			☐ Remove
			Change
			Rémove 75
			Cháirge
			□ Remove
			☐ Change
			🗖 Add
			□ Remove
			☐ Change
			Remove
			Change

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<u> </u>		
		2021 HAR
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		<u> </u>
Effective date, if other than the (If an effective date is listed, the date mu. Note: If the date inserted in this b document's effective date on the I	edate of filing: st be specific and cannot be prior to date of filing or more the lock does not meet the applicable statutory filing receptartment of State's records.	(optional) han 90 days after filing.) Pursuant to 605.0207 (3) quirements, this date will not be listed as the
he record specifies a delaye The 90th day after the re	d effective date, but not an effective time ord is filed.	e, at 12:01 a.m. on the earlier of:
Dated 3/06	2021	
R: Lung Park	Signature of a member or authorized representative of a	member
	•	
Riley Park	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00