

T. LEMIEUX APR 18 2024

. Page;4 c	of 7 2024-	04-17 13:38:23 GMT	19546970677	From: Paulo Gomes
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·		COVER LETTER	•	
TO: Registration : Division of C	Section progrations		•	·
THE DRE	AM REMODEL CONSTRUCT	TION LEC		
	Name of Li	nited Liability Company		
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.		
Please return all corresp	oondence concerning this matte	t to the following:		
	PAULO GOMES			
		Name of Person	MART Seat Seat 1 - 2 - 202 M Landon r proprogram ( A spran	
		ND ACCOUNTING CORP		
		Firm Company		
	240 LOCK ROAD			
		Address		
	DEERFIELD BEACH, FI	.ORIDA 33442		
	BEATRIZIà GOMESINS.C	City/State and Zip Code		
	E-mail address:	to be used for future annual report n	otification)	
For further information	concerning this matter, please c	all:		
PAULO GOMES		954 832-2360		
Name	of Person	at I)	ine Telephone Number	
linclosed is a check for t	he following amount:			
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee. Certificate of Status & Certified Copy (adduoted copy is enclosed)	
•• •••				
<u>Mailing Addre</u> Registration		<u>Street Address:</u> Registration S	ection	
Division of C	Corporations	Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

To:

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

B. If amending the registered agent and/or registered office address on our records, enter the name of the new reg	
Florida document number  1.21000307500    This amendment is submitted to amend the following:    A. If amending name, enter the new name of the limited liability company here:    DREAM REMODEL CONSTRUCTION LLC    The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC"    Enter new principal offices address, if applicable:    (Principal office address, if applicable:    (Mailing address MAY BE A POST OFFICE BON)    B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or registered office address on our records.	
This amendment is submitted to amend the following:    A. If amending name, <u>enter the new name of the limited liability company here</u> :    DREAM REMODEL CONSTRUCTION LLC    The new name must be distinguishable and comain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC".    Enter new principal offices address, if applicable:    (Principal office address, if applicable:    (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 office address on our records.	ıcd
DREAM REMODEL CONSTRUCTION LLC    The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.E.C."    Enter new principal offices address, if applicable:    (Principal office address MUST BE A STREET ADDRESS)    Enter new mailing address, if applicable:    (Mailing address, if applicable:    (Mailing address, MAY BE A POST OFFICE BON)    B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or registered office address on our records, enter the name of the new registered agent and/or registered office address on our records, enter the name of the new registered agent and/or registered office address on our records, enter the name of the new registered agent and/or registered office address on our records, enter the name of the new registered office address on our records, enter the name of the new registered agent and/or registered office address on our records, enter the name of the new registered office address on our records, enter the name of the new registered agent and out records and records agent and out records agent	
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agent and/or the new registered office address here:	egistered
Name of New Registered Agent:	
New Registered Office Address.	
Enter Florida stevei address	
, Florida	

New Registered Agent's Signature, if changing Registered Agent:

Thereby accept the appointment as registered agent and agree to act in this capacity. I further agree 1 cooply 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. Thereby confirm that the limited liability company has been notified in writing of this change.

Cin

If Changing Registered Agent, Signature of New Registered Agent

Zn Code-

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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

Title	Name	Address	Type of Action
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			DReniove
		Mat - 24	DChange
			🖾 Add
			ОКепкоус
			DChange
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			Петюче
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			🖸 Remove
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			]Remove
			🖾 Change
	- <u> </u>		🖾 Add
			CRenkove
			DChange

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

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 tiling or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) <u>Note:</u> 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: (b) The 90th day after the record is filed.

Dated MARCI	27 2024
	Signature & a monthe seminarized representative of a member
AN	REY CUNNHA

Typed or printed name of signee