L99000000 441

(Requestor's Name)				
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(City/State/Zip/Phone #)				
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(Business Entity Name)				
(Document Number)				
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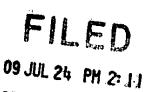
COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	CADY AND	ASSOCIATES L.C.					
<i></i>	Name of Lim	ited Liability Company	 				
The enclosed Articles	of Amendment and fee(s) are sul	omitted for filing.					
Please return all corre	spondence concerning this matter	to the following:					
	Connie Madden						
		Name of Person					
	Purs	suing Your Dreams, LLC.					
	Firm/Company						
	6307 Jessup Drive						
	Address						
	Ze	phyrhills/Florida/33540					
		City/State and Zip Code					
	conniemado E-mail address: (den@pursuingyourdreams to be used for future annual report not	S.COM diffication)				
For further informatio	n concerning this matter, please of	•					
	Sannia Maddan	040	205 0544				
Connie Madden Name of Person		at (813) Area Code & Dayti	me Telephone Number				
Enclosed is a check for	or the following amount:						
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclose	\$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/COUR Registration Sect Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL 3	orations Center Circle				

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



(Name of the Limited	Y AND ASS	SOCIATES L.	S. SECRETAR	RY OF STATE
(Name of the Limited	Florida Limited I	Liability Company)	s on our recares, M.S.	SEE FLORIDA
The Articles of Organization for this Limited L Florida document number L9900000		were filed on	01/19/1999	and assigned
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name o	f the limited liab	ility company her	<u>e</u> :	
Pt	ursuing Your E	Oreams, LLC.		
The new name must be distinguishable and end with "L.L.C."	h the words "Limi	ited Liability Compa	ny," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:		Connie Madd	en	
(Principal office address MUST BE A STREE	T ADDRESS)	6307 Jessup Drive		
		Zephyrhills, F	lorida, 33540	· ·
Enter new mailing address, if applicable:		Connie Madd	en	··-·
(Mailing address MAY BE A POST OFFICE BOX)		6307 Jessup	drive	
		Zephyrhills, F		
B. If amending the registered agent and/registered agent and/or the new registered of Name of New Registered Agent: New Registered Office Address:		<u>e:</u> dden	our records, <u>enter t</u>	he name of the new
New Registered Office Address:		Enter Florida street address		
		Zephyrhills	, Florida	33540
		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 608, 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.

Connie Madden

DN: cn=Connie Madden, o=Pursuing Your Dreams, ou=Menager, email=madden3591@gmail.com, c=US Deta: 2009.07.16 18:33:53 -04:00*

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action				
MGR	Connie Madden	6307 Jessup Drive	✓ Add Remove				
		Zephyrhills, Florida, 33540					
MGR	Richard A, Davis	4822 Escapardo Way	✓ Add				
		Colorado Springs Colorado 8	Remove 30917-3720				
MGRN	Alan D. Madden	6307 Jessup Drive	✓ Add				
		Zephyrhills, Florida, 33540	Remove				
MGR	CADY, THOMAS Z	12765 ASHTON OAKS DRIV					
		FORT MYERS FL 33912	✓ Remove				
MGR	LE BRET, ANDREW S	605 BEAVER COURT	Add				
		MILTON ONTARIO L9T 4A8	Remove				
			Add				
		<u> </u>	Remove				
D. If an	nending any other information, en	ter change(s) here: (Attach additional sheets, if	necessary.)				
	I have three documents inclu	ided, the one document cr2e041 and I h	ave KES				
	included \$516.25 for reinstatement and for the past years of filing. I also have						
	included form inhs18 for cha	nge of officers and a fee of \$25.00 and t	his form In C				
		otal of \$571.25. I would like to know the o	-Man - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -				
	you can contact me at 813-3	95-8544, Thank you, Connie Madden					
Dated	July 20	,					
	Connie						
	Signature of a member or authorized representative of a member						
		Connie Madden					
		Typed or printed name of signee					

Page 2 of 2

Filing Fee: \$25.00