(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: Phone call on 6/22/18 to Add Print and covered R A. name. Feint and covered R A. name.	(Requestor's Name)
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: Prone call on 6/22/18 to Add Feinth and correct RJA. Name. Feinth and correct RJA. Name.	(Address)
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phone call on 6/22/18 to Add Feinth and correct R/A. name. N.V. Dubsa	Certified Copies Certificates of Status
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: The Dream Foundation
DOCUMENT NUMBER: <u>NO100003891</u>
The enclosed Articles of Amendment and fee are submitted for tilling.
Please return all correspondence concerning this matter to the following:
Michael Dobson (Name of Contact Person)
LOGS Roandon Hill Drive
4005 Brandon Hill Drive (Address)
Tallahassee Florida 32309 (City/State and Zip Code)
(City/ State and Zip Code)
Michael Ol Dubson and Craig. com
For further information concerning this matter, please call:
Mic hae 1 Dobson at (850) 241-5896 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(Name of Contact Person) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State:
□ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certificate of Status Certified Copy Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is Enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation of

The Dream Fo	rundation, Inc.	
	itly filed with the Florida Dept. of State)	
NO1 000003 (Document Numb	891 per of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the fo	llowing
A. If amending name, enter the new name of the corporat	tion:	
name must be distinguishable and contain the word "corpora		The new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." or	"Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS		<u>\</u>
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	N A	FILED FILED
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office:	address:	C . A
Name of New Registered Agent: DOB	son, crang and Associa	utes
New Registered Office Address:	Son, (raig and ASSOCIO 305 Brandon Hill Dr (Florida street address)	
	Tallahassec Florida Fl (City) (Zip Code)	<u>32</u> 309
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for the second secon	Agent: amiliar with and accept the obligations of the position My Signature of New Registered Agent, if changing	
	signada e oj ivew ivegisterea A g ent, ij enanging	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PD	Cheryl Gonzalez	1620 Bartron Rd Apt Jacksonville FI
Kemove			32207
2) Change Add	<u> </u>	Hubert Brown	1102 E. Tennessee 57 Tallahussee.
X Remove	Chairman	Rev Martin Touley	Fla 33 640 Marion Street
AddRemove	•		Daytona Beach, Fluide 32/14
4) Change Add	Director	Mylah Kate Ruhinson	2626 East Pack Ave #230
Remove 5) Change Add Remove	Treasurer	Kimberlyn Elliott	Florida, 32301 3125 SW 126th Terras Archer, Florida 32618
6) Change Add	Secretary	Doyle Smith	2081 Victory Garden Lans Tullahussee
Remove		Page 2 of 4	Florida, 3.2301

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)						
Fei/Ein	Number	65-114	11852			
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						<u></u>
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	-					
	-					
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The date of each amendment(s) ad late this document was signed.	option:	if other than the
Effective date if applicable:		
in approximate	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo locument's effective date on the Dep	ek does not meet the applicable statutory filing requirements, this date with artment of State's records.	II not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adwas/were sufficient for approva	opted by the members and the number of votes cast for the amendment(s	
☐ There are no members or members adopted by the board of directors	ers entitled to vote on the amendment(s). The amendment(s) was/were rs.	
Dated June.	21, 2018	
Signature	1at	
have not bee	nan or vice chairman of the board, president or other officer-if directors n selected, by an incorporator — if in the hands of a receiver, trustee, or ppointed fiduciary by that fiduciary)	
	Michael DobSan (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
•	Incorporator/ President (Title of person signing)	
	(Title of person signing)	