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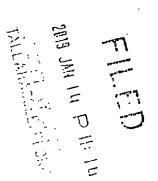
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## COVER LETTER

TO: Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Double NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$52.50 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & S35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations **Division of Corporations** 

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment

Article	es of Incorporation of	
Double for Name of Corporation as current	or Dream	t. of State)
N 1 8 0 00 (Document Numb	ber of Corporation (if known)	,
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit (	Corporation adopts the following
A. If amending name, enter the new name of the corporation of the distinguishable and contain the word "corporation" or "Co." may not be used in the name.	Dreams 1	The new abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>	N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA	
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office		ne name of the
Name of New Registered Agent:	NIP	+
New Registered Office Address:	(Florida stree	et address)
	(City)	, Florida (Zip Code)

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

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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		Doc Jones Smith	NA			
Type of Action (Check One)	<u>Title</u>	Name		<u>Addres</u> s		
1) Change Add						
Remove				<del></del>		
2) Change					2019 JAN	7
Add				-	25: = 0 =	,,
3 ) Change Add		<u></u>				<u> </u>
Remove						
4)Change						
Add						
5) Change	<del></del>					
Add						_ <del>_</del>
6) Change		<del></del>				
Add Remove						

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)	
	M/A	

The date of each amendment(s) adoptionate this document was signed.	on:	, if other than the
Effective date if applicable:		- 1411
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block do document's effective date on the Departm	nes not meet the applicable statutory filing requirements, this date will not nent of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted was/were sufficient for approval.	d by the members and the number of votes cast for the amendment(s)	
There are no members or members e adopted by the board of directors.	entitled to vote on the amendment(s). The amendment(s) was/were	
Dated Signature /	La Calal	
have not been sel	or vice chairman of the board, president or other officer-if directors lected, by an incorporator – if in the hands of a receiver, trustee, or inted fiduciary by that fiduciary)	
	Sheila A. Caballero (Typed or printed name of person signing)	
<u></u>	Treasurer (director  (Title of person signing)	