

(Re	equestor's Name)	
(Ac	idress)	
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(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Do	ocument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: Dream Of	otions Inc.	
	CR: PØ7ØØØØ	•	
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
_	Robert	Smith Name of Contact Person	
		Name of Contact Person	1
		Ptions, Inc. Firm/Company	
		Firm/ Company	
	11623 Bi	ddeford Pl Address	
-		Address	
	New Port	Richen . FL 3	4654
-	, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	Richey, FL 3 City/State and Zip Cod	:
	dreamoptions? E-mail address: (to be us	inc Oyahoo-com sod for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Rober+	Smith	at (727	378-5693 de & Daytime Telephone Number
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment of State:
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)
	ng Address		Address
•	dment Section on of Corporations		lment Section on of Corporations

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

	OPTIONS, FIC.	Ionida Dant of State)	
		iorida Dept. of State)	
	- ウワ 	nown)	
•	•		
rsuant to the provisions of section 607.1006, Florida Articles of Incorporation:	Statutes, this Florida Profit Con	rporation adopts the following	g amendm e r
If amending name, enter the new name of the cor	rporation:		
me must be distinguishable and contain the word corp.," "Inc.," or Co.," or the designation "Corp, ord "chartered," "professional association," or the a	" "Inc," or "Co". A professio		
Enter new principal office address, if applicable: rincipal office address <u>MUST BE A STREET ADD</u>		 	
		2 /2	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>	<u> </u>	LAHAS	¥ T
		Sil	9 [
			مب
If amending the registered agent and/or registered new registered agent and/or the new registered of	ed office address in Florida, en office address:	iter the name of the	40
Name of New Registered Agent			
	(Florida street address)		
	(City)	, Florida(Zip C	
New Registered Office Address:			

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	<u>PT</u> <u>John</u>	Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
_X Add	<u>SV</u> <u>Sally</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Rebecca Smith	AND STATE OF THE S
Add			
Remove			
2) Change	I	Rebecca Smith	
Add			
Remove	·	D i	
3) Change	5	Rebecca Smith	
Add			
Remove			
4) Change	P	Robert Smith	11623 Biddeford Pl
Add			New Port Richey, FL
Remove			34654
5) Change	T	Robert Smith	11623 Biddeford Pl
Add		<u> </u>	New Port Richey, FL
Remove			34654
	ہے	-)	
6)Change	<u> </u>	Robert Smith	11623 Biddeford Pl
√ Add			New Port Richey, FL
Remove			34654

	(Be specific)
	
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an analysis
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an analysis
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an it and an itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an it and an itself:

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 1/16/2018 Signature Rebeccatt Smith	
Signature Rebeccat Smith	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
Rebecca H. Smith (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President (Title of person signing)	
(Title of person signing)	