P07000069083

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OB MAY 27 PH IN DISTANT OF STATE TALL AHASSEE, FLORI

COVER LETTER

TO: Amendment Section Division of Corporations

•
NAME OF CORPORATION: EFUTONS INC
DOCUMENT NUMBER: P0700069083
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
ANTHONY A. DAUGHERTY (Name of Contact Person)
EFUTONS INC (Firm/Company)
15117 ARBOR HOLLOW DRIVE
ODESSA, FLORIDA 33556 Rity/ State and Zip Code)
For further information concerning this matter, please call:
ANTHONY A. DAUGHERTY at (877) 233-6224 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
S35 Filing Fee Scertificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee Scertified Copy (Additional Copy is enclosed) \$52.50 Filing Fee Scertified Copy (Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

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SLURE TARY OF STATE! TALLAHASSEE, FLORIDA

EFUTONS INC.

(Name of corporation as currently filed with the Florida Dept. of State)

P07000069083
(Document number of corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
DREAMLINENS INC.
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A."
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC) ADD MIANDRA F. DAUGHERTY
TITLE VICE PRESIDENT
ADDRESS 15117 ARBOR HOLLOW DR.
ODESSA, FL 33556
(Attach additional pages if necessary)

	des for exchange, reclassification, or cancellation of issued shares, provisions mendment if not contained in the amendment itself: (if not applicable, indicate N/A)
N	A

The data of each amendment(s) adoption: 5/21/08
The date of each amendment(s) adoption:
Effective date if applicable: NIH
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved 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)
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.
Signature (By a director, president of other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, of other court appointed fiduciary by that fiduciary)
ANTHONY A. DAUGHERTY (Typed or printed name of person signing)
PRESIDENT
(Title of person signing)

FILING FEE: \$35