## 911000068817

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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAMÉ OF CORPO	RATION:T	HE PLACE OF DREAMERS	S CORP		
DOCUMENT NUM	BER:	P11000068817			
The enclosed Articles	s of Amendment and fee	are submitted for filing.			
Please return all corre	espondence concerning the	his matter to the following:			
_	<del> </del>	DAVID BALBIN			
		Name of Contact Person			
_	THE PLA	CE OF DREAMERS CORP			
		Firm/ Company			
	42011	B N ARMENIA AVENUE			
		Address			
		TAMPA, FL 33607			
		City/ State and Zip Code			
	E-mail address: (to be us	AVI@AOL.COM sed for future annual report notification)			
For further information	on concerning this matter	r, please call:			
EPIFAI	NIO GONZALEZ	at (718)26	61-2409		
Name of	Contact Person	Area Code & Daytime Tele	ephone Number		
Enclosed is a check for	or the following amount	made payable to the Florida Depart	ment of State:		
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Add: Amendment S	Section	Street Address Amendment Section			
Division of Corporations		Division of Corporations	•		
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle	e		
, m.m.m., 1	— - <del></del>	Tallahassee, FL 32301	<del>-</del>		

## Articles of Amendment to Articles of Incorporation of

· •	of	FILE
THE PLACE C	F DREAMERS CO	RP. 11 Aug.
· (Name of Corporation as curr		
P11	000068817	TALLAHAGAT OF STATE
- (Document Nur	mber of Corporation (if know	a Dept. of State)  FALLAHASSEE, FLORIDA
ursuant to the provisions of section 607.100 mendment(s) to its Articles of Incorporation:	06, Florida Statutes, this Fl	
If amending name, enter the new name o	f the corporation:	
		The new
ame must be distinguishable and contain bbreviation "Corp.," "Inc.," or Co.," or the ame must contain the word "chartered," "pro	e designation "Corp," "Inc,	," or "Co". A professional corporation
. Enter new principal office address, if app Principal office address MUST BE A STREE		<del></del>
rincipal office address MOST BE A STREE	<u>ADDRESS</u> )	
		<del></del>
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	**************************************	
. If amending the registered agent and/or new registered agent and/or the new registered		n Florida, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street a	(ddress)
ter ite signed of the signed s	(1 tortaa sir eet al	,
	(City)	, Florida (Zip Code)
	(City)	(Zip Code)
ew Registered Agent's Signature, if changi		
hereby accept the appointment as registered a	agent. I am familiar with ar	nd accept the obligations of the position.
	<u> </u>	<del> </del>
	Signature of New Registered	l 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u> </u>	Epifanio Gonzalez	80-08 135th Street Jamaica, NY 11435 Apt# 314	☑ Add □ Remove
VP	Daniel Gonzalez	6432 S.W 23 Street Miramar FL 33023	☑ Add □ Remove
<u>s</u>	Dina Yane Naranjo	3902 FOWLER DRIVE TAMPA FL 33614	
	ing or adding additional Articles, editional sheets, if necessary). (Be s		
provision		e, reclassification, or cancellation on the amendment of the amendment in	

The date of each amendment(s) a  Effective date <u>if applicable</u> :  (not)  Adoption of Amendment(s)	(date of adoption is required)  o more than 90 days after amendment file date)  (CHECK ONE)
(ne	
Adoption of Amendment(s)	(CHECK ONE)
reoperation remembers (5)	
The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(sufficient for approval.
	oproved by the shareholders through voting groups. The following statement 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	ting group)
(voi	ting group)
The amendment(s) was/were ac action was not required.	lopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	lopted by the incorporators without shareholder action and shareholder
Dated_08/04/26	011
Signature	Continue
(By a di selected	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	DAVID BALBIN
	(Typed or printed name of person signing)
	Director
_	(Title of person signing)