# P13000025969

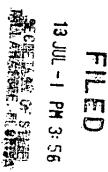
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C. LEWIS 5 2013
EXAMINER

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Amorican I	Drooms Tochnologies, Inc	
NAME OF CORPORATION: American [		
DOCUMENT NUMBER: P1300002596	<del>9</del>	
The enclosed Articles of Amendment and fee are s	ubmitted for filing.	
Please return all correspondence concerning this m	atter to the following:	
Anthony Harris		
<del></del>	Name of Contact Person	
American Dream	s Technologies, Inc.	
	Firm/ Company	
1806 Missouri Av	re.	
	Address	
St. Cloud, FL 347	769	
	City/ State and Zip Code	
tonyshy3148@yahoo	o.com	
	used for future annual report notification)	
For further information concerning this matter, plea	ase call:	
Anthony Harris	at (407 ) 285-2556	
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made	e payable to the Florida Department of State:	
■ \$35 Filing Fee	Certified Copy (Additional copy is enclosed)  S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address	Street Address	
Amendment Section	Amendment Section	
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	
· ····································	Tallahassee, FL 32301	

## **Articles of Amendment** Articles of Incorporation



## American Dreams Technologies, Inc.

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

### P13000025969

(Document Number of Corporation (if known)

dment(s) to

Pursuant to the provisions of section 607.1006, F its Articles of Incorporation:	Florida Statutes, this Florida Profit Co	orporation adop	ots the following amendme
A. If amending name, enter the new name of t	the corporation:		
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "word "chartered," "professional association," o	Corp," "Inc," or "Co". A professi		
B. Enter new principal office address, if appli (Principal office address MUST BE A STREET			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E BOX)		
D. If amending the registered agent and/or re new registered agent and/or the new regist		enter the name	of the
Name of New Registered Agent			
	(Florida street address)	-	
New Registered Office Address:	(City)	, Florida	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag		he obligations o	of the position.
Signature	of New Registered Agent, if changin		

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	Р	David Harris	1806 Missouri Ave.
Add			St. Cloud, FL 34769
X Remove			
2) X Change	<u>P</u>	Anthony Harris	1806 Missouri Ave.
Add		<del></del>	St. Cloud, FL 34769
Remove			
3) Change	VP	Henry Handrahan	1806 Missouri Ave.
X			St. Cloud, FL 34769
Remove			
4) Change			
Add			- 12
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additional Arti ttach additional sheets, if necessary).	(Be specific)	
an amendment provides for an exch rovisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		

The date of each amendment	(s) adoption: June 1, 20	)13
Effective date <u>if applicable</u> :	June 1, 2013	12
	(no more tha	an 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/wer by the shareholders was/we		The number of votes cast for the amendment(s)
		through voting groups. The following statement d to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was	were sufficient for approval
by		.,,
	(voting group)	
action was not required.		tors without shareholder action and shareholder without shareholder action and shareholder
action was not required.	e adopted by the incorporators	without shareholder action and shareholder
Dated	06/26/2013	
Signature	3	
(E se		officer - if directors or officers have not been n the hands of a receiver, trustee, or other court lary)
	Myron Davis	
	<del></del>	ted name of person signing)
	Incorporator/ Re	egistered Agent

(Title of person signing)