P18000 72135

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ry/State/Zip/Phon	e #)
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Special Instructions to	Filing Officer:	,
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SEP - 6 ZII

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION:REAL ESTATE D	REAMS OF AMERICA C	ORP		
DOCUMENT NUMB					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	JA	QUELINE ROSADO			
		Name of Contact Person	1		
	TAX HOUSE MIAMI				
		Firm/ Company			
	301 NE 79TH ST SUITE 2				
		Address			
	MIAMI, FLORIDA 33138				
	City/ State and Zip Code				
		City/ State and Esp Cod	•		
		DUI@TAXHOUSEMIAMI			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	n concerning this matter, pleas				
Name	of Contact Person	at ()		
;Name (n Confact reison	Arca Co	de & Daytine Telephone (vulnoe)		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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 Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amenc Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

of

REAL ESTATE DREAMS OF AMERICA CORP

(Name of Corporation	on as currently filed w	ith the Florida Dept. of S	tate)
P18000072135			
(Docum	ent Number of Corpora	ation (if known)	
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	Statutes, this <i>Florida</i>	Profit Corporation adopts	the following amendment(
A. If amending name, enter the new name of the col	rporation:		
DREAMS OF AMERICA CORP			The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp. word "chartered," "professional association," or the c	" "Inc." or "Co". A		or the abbreviation
B. Enter new principal office address, if applicable:			
(Principal office address <u>MUST_BE A STREET ADD</u>	<u>RESS</u>)		
C. Enter new mailing address, if applicable:			51
(Mailing address MAY BE A POST OFFICE BO)	<u> </u>		-
			SS 2
D. If any diameter a six of the second second second	1 55 11		
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		iorida, enter the name of	
Name of New Registered Agent			
Name of New Registered Agent			
.	(Florida street addre		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
New Registered Office Address:	(City)	, Flor	ida (Zip Code)
	,,		(134) G.M.
New Registered Agent's Signature, if changing Regi			
I hereby accept the appointment as registered agent. I	am familiar with and	accept the obligations of th	e position.
Signa	ture 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, at 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 = Chi Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each officeld. 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 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 Chang Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	$\frac{\nabla}{}$	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			19 A
Add			
Remove			
4) Change		_	STA STA
Add			L DA
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary). (Be specific)	
N/A	
<u> </u>	
	• • •
	7
	19 AUG 27 SECNE JARY
	E SAN
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	SEE 7
(if not applicable, indicate N/A)	
N/A	5. 5. C
	17 Rep.
	· > ~

The date of each amendment(s) adoption:	, if other than t
date this document was signed.	
Effective date <u>if applicable</u> :	
(na 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 wildocument's effective date on the Department of State's records.	I not be listed as 6
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east 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.	
08/21/2019 Dated	
Signature (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	19 AU
appointed fiduciary by that fiduciary)	
YAMILA LOPEZ	627
(Typed or printed name of person signing)	至 门
PRESIDENT SQ T	å D
(Title of person signing)	