P1900	2056416
(Requestor's Name) (Address)	
(Address) (City/State/Zip/Phone #)	000438748740
	11/01/2401021028 **43.75
(Business Entity Name) (Document Number)	
Certified Copies Certificates of Status	
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Office Use Only	-1 PH 4: 35



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ______

DOCUMENT NUMBER: P19000056416

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

CARLOS TRELLES

SEVEN DREAMS LABS

Firm/ Company

Name of Contact Person

1222 SE 47th Street, Suite 225

Address

CAPE CORAL, FL 33904

City/ State and Zip Code

etrelles@axonlatam.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carlos Trelles	305	8453737
Name of Contact Person	Area Code	& Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

□ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 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	() -	2024
Amendment Section	Amendment Section	Ω	
Division of Corporations	Division of Corporations		ŝ
P.O. Box 6327	The Centre of Tallahassee 2.	! 	 1
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	201 - 1	<u> </u>
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SEVEN DREAMS ORGANIC FARMS

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

P19000056416

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation: SEVEN DREAMS LABS (Or P		Tha naw
name must be distinguishable and contain the word "corporation," " "Inc.," or Co.," or the designation "Corp." "Inc," or "Co", "chartered," "professional association." or the abbreviation "P.A."	A professional corporation name must conta	ion "Corp.," in the word
B. Enter new principal office address, if applicable:	16135 DAISY DR.	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	PUNTA GORDA, FL 33955	
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	1222 SE 47th Street, Suite 225	
	CAPE CORAL, FL 33904	
D. <u>If amending the registered agent and/or registered office add</u> <u>new registered agent and/or the new registered office address</u> <u>Name of New Registered Agent</u>		_
(Florida st	reet address)	_
New Registered Office Address:	, Florida (City) (Zip	Code)
Check if applicable	with and accept the obligations of the position.	2024 NOV - 1 PM 4: 35
□ The amendment(s) is/are being filed pursuant to s. 607.0120 (11)	(e), F.S. [7]	· · ·

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)

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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: <u>X</u>Change

PT John Doe

Mike Jones

Y

X Remove

<u>X</u> Add <u>SV</u> <u>Sally Smith</u>

Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	Р	CARLOS TRELLES	1222 SE 47th Street
Add			Suite 225
Remove			Cape Coral, FL 33904
2) X Change	VP	ANDREA TRELLES	1222 SE 47th Street
Add			Suite 225
Remove 3) Change			Cape Coral, FL 33904
Add			
Remove			
4) Change			
Add			
Remove			·····
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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E. <u>If amending or adding additional Articles, enter change(s) here</u>: (Attach additional sheets, if necessary). (Be specific)

N/A.

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:	
(if not applicable, indicate N/A)	
N/A.	
	N
	202
	2024
	2024 KO
	2024 WOX -
	2024 KOV - 1
	ZOPH WOV - 1 PH
	2004 MOV - 1 PH 4
	2024 MOV - I PH 4: :
	2024 MOY - I PH 4: 36

09/30/2024 The date of each amendment(s) adoption: date this document was signed.

09/30/2024

Effective date if applicable:

. . . .

(no more than 90 days after amendment file date)

______, if other than the

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)

(CHECK ONE)

- The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- \Box 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)

09/30/2024 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 appointed fiduciary by that fiduciary)

Carlos Trelles

(Typed or printed name of person signing)

President

(Title of person signing)

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