Florida Department of State C Division of Corporations Electronic Piting Cover Sheet

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Fax Number : (850)617-6380 From: Account Name : SORSHER & ASSOCIATES, LLC. Account Number : I20170000056 Phone : (954)842-2931 Fax Number : (954)842-2936 **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**	To:	Division of Cor	concerions		
From: Account Name : SORSHER & ASSOCIATES, LLC. Account Number : I20170000056 Phone : (954)842-2931 Fax Number : (954)842-2936 **Enter the email address for this business entity to be used for future				-	
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Help

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: YOUR DREAM	SHOP.INC	
	BER: P19000063962	·	
	of Amendment and fee are s	ubmitted for filing.	
Please return all corre	spondence concerning this m	atter to the following:	
	GROSU , IULIA		
		Name of Contact Perso	on
	YOUR DREAM SHOP INC		
		Firm/ Company	
	1953 PEMBROKE RD		
		Address	
	HOLLYWOOD, FL 33020		
		City/ State and Zip Cod	le
	antoninat085@gmail.com		
	E-mail address: (to be u	sed for future annual repor	t notification)
For further information	concerning this matter, pleas	se cali:	
GROSU , IULIA		at (³⁰⁵	712-0034
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Pee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O. I	ng Address indrent Section ion of Corporations Box 6327 nassee, FL 32314	Amend Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment to Articles of Incorporation of



The new and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," nation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word ociation," or the abbreviation "P.A." address, if applicable: TBE A STREET ADDRESS) s, if applicable: A POST OFFICE BOX) agent and/or registered office address in Florida, enter the name of the or the new registered office address: add Agent (Florida street address)	OUR DREAM SHOP.INC		. <i>O</i>	
cotion 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to the new name of the corporation: The new nad contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," nation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word ociation," or the abbreviation "P.A." address: if applicable: TBE A STREET ADDRESS) s. if applicable: A POST OFFICE BOX) agent and/or registered office address in Florida, enter the name of the or the new registered office address: id Agant (Florida street address)	(Name of Corporation as curre	ntly filed with th	he Florida Dept. of State)	
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(Florida street address) Address: , Florida	new registered agent and/or the new registered office addre	<u>ss:</u>	, enter the pame of the	
(Florida street address) Address: , Florida	Name of New Registered Agent			
Address:, Florida	tigine of them Registered Agent	···		
	(Florida s	treet address)		
	New Registered Office Address:		. Florida	
		(City)		
ure, if changing Registered Agent:	Registered Agent's Signature, if changing Registered Agen	<u>ti</u> with and assant t	the chlingsions of the maritim	
ture, if changing Registered Agent: as registered agent. I am familiar with and accept the obligations of the position	v Registered Agent's Signature, if changing Registered Agent reby accept the appointment as registered agent. I am familiar	iti with and accept t	the obligations of the position	

Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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.

Example:

X.Change	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	VP	SHALUMOV, ANTONINA	1953 PEMBROKE RD
X Add			HOLLYWOOD, FL 33020
Remove			
2) Change			<u> </u>
Add			
Remove 3) Change			
Add			
Remove			·
4) Change			
Add			
Remove			
5) Change	· · · · · ·		
Add			
Remove			
6) Change			
Add			
Remove			

	litional sheets, if necessary).	. (Be specific)
		
		
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_		
* ************************************		
· II an amendi	ment provides for an exchi	nange, reclassification, or cancellation of issued shares, indiment if not contained in the amendment itself:
(if not a	pplicable, indicate N/A)	nument if not contained in the amendment itself:
(i) NOI u	ppricuote, maicute 14A)	
·		

The date of each amendment(s date this document was signed.) adoption:	, if other than the
Effective date if applicable:		
<u></u> -	(no more than 90 days after amendment file date	2)
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirement Department of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareh	nolder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the am sufficient for approval.	nendment(s)
☐ The amendment(s) was/were a must be separately provided f	approved by the shareholders through voting groups. The following or each voting group entitled to vote separately on the amendment	ng statement nt(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by:	(voting group)	
	(voting group)	
11/02/20 Dated	···	
Signature	Aulia Grosu	
selec	director, president or other officer – if directors or officers have need, by an incorporator – if in the hands of a receiver, trustee, or onted fiduciary by that fiduciary)	not been other court
	IULIA GROSU	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	 .