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2021 APS -5 AH 11: 03

A RAMSEY

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: DREAM BIG II C	ORP	
	BER: P20000083641		
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	AARON HERNANDEZ		
	DREAM BIG II CORP	Name of Contact Persor	1
	701 NW 132 PL	Firm/ Company	
		Address	
	MIAMI, FL 33182	City/ State and Zip Code	e
	dreambigtattoos@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
AARON HERNANDEZ		305 at (5427625
Name	of Contact Person	Area Code & Daytime Telephone Numbe	
Enclosed is a check f	or the following amount made	payable to the Florida Dep	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	El852.50 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 The C	Address Iment Section on of Corporations fentre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

ticles of Incorporation of 2021 APP ED

DKEAM BIG II CORP		5
(Name	of Corporation as currently filed with t	he Florida Dept. of State)//-
P20000083641		//3
	(Document Number of Corporation	(if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this <i>Florida Profi</i>	t Corporation adopts the following amendment(s) to
A. <u>If amending name, enter the new n</u>	ame of the corporation:	
		The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	"orp." "Inc." or "Co". A professional	"incorporated" or the abbreviation "Corp.," I corporation name must contain the word
B. Enter new principal office address. (Principal office address MUST BE A S		
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		
D. If amending the registered agent an new registered agent and/or the new	od/or registered office address in Florida v registered office address:	a, enter the name of the
Name of New Registered Agent	ADONIS PAEZ FERNANDEZ	
Same of Sen Acquirentingen	16812 SW 137 AVE. APT 835	
New Registered Office Address:		Florida
itor arginaria <u>cyfric</u> yigirig <u>s</u> s.	(City)	Zip Coder
New Registered Agent's Signature, if c	hanging Registered Agent: cred agent. I am familiar with and accep	a tha abligations of the constitu
merce, accept the equipment as regist	crea agem. Tam jumatan wun ana accep	t the orngations of the position.
	Signature of New Revistered Ages	nt if changing

Check if applicable

(1) The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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: <u>X</u> Change	PT John	<u>ı Doc</u>			
X Remove	<u>V</u> <u>Mik</u>	e Jones			
_X Add	<u>SV</u> S <u>all</u>	Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s		
1) Change	V	ADONIS PAEZ	16812 SW 137 AVE. APT 835. ML		
Add Remove					
2) Change	<u>V</u>	ADONIS PAEZ FERNANDEZ	16812 SW 137 AVE. APT 835, ML		
X Add					
Remove 3.) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change			· ··· ·		
Add					
Remove					
6) Change					
Add					
Remove					

	nal sheets, if necessary,	у. (те крестис)			
N/A					
					
					
·					
					
					
					
<u>If an amendm</u>	<u>ent provides for an ex</u>	change, reclassifie:	<u>ation, or cancellat</u>	ion of issued shares	1
<u>provisions for</u>	r implementing the ar	<u>nendment if not co</u>	ntained in the ame	endment itself:	
	plicable, indicate N/A)				
S/A					
	···				
					
		···			
· ·					
			·		

The date of each amendment(s) adoption:	, if other than the
Effective date <u>if applicable</u> : (no 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 wi document's effective date on the Department of State's records.	ll not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and action was not required.	d shareholder
C. 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	
4/3/2021 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) AARON HERNANDEZ	
(Typed or printed name of person signing)	
PRESIDENT	

(Title of person signing)