

F0900000 4471

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

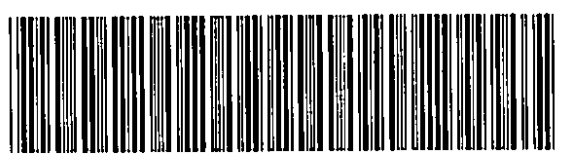
(Business Entity Name)

(Document Number)

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2019 JAN 14 AM 8:42

SECOND JUDGE STATE
TALLAHASSEE, FL

R. WHITE
JAN 17 2019

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DREAMHOME Raffle, Net Inc
(Name of Corporation)

DOCUMENT NUMBER: FD9000004471

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

Katrina Bass
(Name of Person)

Dreamhome Raffle, Net Inc
(Name of Firm/Company)

P. O. Box 82440
(Address)

Tampa FL 33682
(City/State and Zip Code)

For further information concerning this matter, please call:

A. Stewart at (813) 557-6061
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION

FILED

2019 JAN 14 AM 8:42

SECRETARY OF STATE
TALLAHASSEE, FL

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509, Florida Statutes, the undersigned, Katrina Bass
(Name of Registered Agent)

hereby resigns as Registered Agent for DREAMHOME KAFFE.NET INC
(Name of Corporation)

309000004471
(Document Number, if known)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed. 12/31/18

[Signature]
(Signature of Resigning Agent)

If signing on behalf of an entity:

KATRINA BASS
(Typed or Printed Name)

RA/Pres
(Capacity)

Fee for filing this document:

- \$87.50 - Active Corporation
- \$35.00 - Administratively dissolved/voluntarily dissolved/
withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314