that my name appears above, or on an attachment with all other like empowered.

MGR

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: DORIS C. EDWARDS

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000101709

Entity Name: AMERICAN DREAM REALTY REFERRAL SERVICE, LLC

Current Principal Place of Business:

2100 CONSTITUTION BLVD. #141 SARASOTA, FL 34231

Current Mailing Address:

1737 LARAMIE STREET SARASOTA, FL 34231 US

FEI Number: NOT APPLICABLE

Name and Address of Current Registered Agent:

EDWARDS, DORIS C 1737 LARAMIE STREET SARASOTA, FL 34231 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title MGR EDWARDS, DORIS C Name Address **1737 LARAMIE STREET** City-State-Zip: SARASOTA FL 34231

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and

Certificate of Status Desired: No

FILED Mar 04, 2016 Secretary of State CC6911570011

Date

03/04/2016 Date