

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000071367

**Entity Name:** DREAMING FLORIDA LLC

**Current Principal Place of Business:**

28870 US HWY 19 NORTH  
SUITE 362  
CLEARWATER, FL 33711

**Current Mailing Address:**

28870 US HWY 19 NORTH  
SUITE 362  
CLEARWATER, FL 33711 US

**FEI Number:** 61-1876951

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ARCIERI, FRANCESCO  
28870 US HWY 19 NORTH  
SUITE 362  
CLEARWATER, FL 33711 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:** FRANCESCO ARCIERI

02/08/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name AMOROTTI, RUGGIERO  
Address VIA GASSENDI N. 6  
City-State-Zip: 20155 MILANO ITALY  
  
Title MGR  
Name ARCIERI, FRANCESCO  
Address 28870 US HWY 19 NORTH  
SUITE 362  
City-State-Zip: CLEARWATER FL 33711

Title AMBR  
Name CHIARIELLO, SARA  
Address VIA GASSENDI N. 6  
City-State-Zip: 20155 MILANO ITALY

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

**SIGNATURE:** FRANCESCO ARCIERI

MGR

02/08/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date