

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000228354

Entity Name: DREAMERS TAKE RISKS LLC

Current Principal Place of Business:

2332 GALIANO STREET
2
CORAL GABLES, FL 33134

Current Mailing Address:

2332 GALIANO STREET
2
CORAL GABLES, FL 33134 US

FEI Number: 82-2070374

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NELSON, WILLIE
5220 NW 30TH PL
MIAMI, FL 33142 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

_____ Date

Authorized Person(s) Detail :

Title MGR
Name NELSON, WILLIE R
Address 5220 NW 30TH PL
City-State-Zip: MIAMI FL 33142

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: WILLIE NELSON

MANAGER

03/07/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date