

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000301156

**Entity Name:** DREAMPOP LLC

**Current Principal Place of Business:**

206 W FRIERSON AVE  
TAMPA, FL 33603

**Current Mailing Address:**

206 W FRIERSON AVE  
TAMPA, FL 33603 US

**FEI Number:** 84-3926451

**Certificate of Status Desired:** No

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

FRIEND, LINDSEY  
206 W FRIERSON AVE  
TAMPA, FL 33603 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           | AP                 | Title           | AP                 |
| Name            | FRIEND, LINDSEY    | Name            | CHANCE, TRAVIS     |
| Address         | 206 W FRIERSON AVE | Address         | 206 W FRIERSON AVE |
| City-State-Zip: | TAMPA FL 33603     | City-State-Zip: | TAMPA FL 33603     |

*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:** LINDSEY FRIEND

**CO-FOUNDER**

**04/09/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date