## 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

REINSTATEMENT							F1	LEU		
DOCUMENT # L05000085685							SECRETAR IVISION OF (	Y OF ST	TA1E	
1. Entity Name DREAM KORP, LLC							or oc	ORPOR	ATIONS	
<b>[</b>	r					<b>7</b> (	06 OCT 26	AM 10:	26	
Principal Place of Business Mailing Address					<u> </u>					
718 DUVAL STREET KEY WEST, FL 33040			718 DUVAL STREET KEY WEST, FL 33040			1				
			N2. Webi, 12 333.0						 	
2. Principal Place of Business			3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			10232006	REIN-LLC	CR2E1	01 (11/05)	
City & State			City & State			4. FEI Numb	er - <i>338 47 9</i>	7	ļ <del></del>	oplied For of Applicable
Zip	Country		Zip Country		ntry	5. Certificate	of Status Desired		\$5.00 Add Fee Require	
	6. Name	and Address of Current I	egistered Agent Name			7. Name and	d Address of New R	egistered A	Agent	
VAN LOOI	•					e (P.O. Boy Numb	or in Not Accortable	.,		
3158 NORTHSIDE DRIVE KEY WEST, FL 33040			Street Addr			dress (P.O. Box Number is Not Acceptable)				
<u> </u>					City		<del></del>	FL	Zip Code	e
8. The above	named entit	y submits this statement for	the purpose of changing its	Gegister	ed office or regis	stered agent, or bo	oth, in the State of Fk		amiliar with,	and accept
8. 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. I am familiar with, and accept the obligations of registered agent.										
SIGNATURE	Signature, typed	Anted name of registered agent a	and title if applicable. (NOTI	E: Register	ed Agent signature rec	quired when reinstating	)	DATE	4-06	<del></del>
FILE NOWIN FEE IS \$50.00 In accordance with s. 607.					103/2\/b\ F.S	the limited	Mak	e check p	avable to	
		7, Fee will be \$100.00	liability company did	not red	ceive the prior r	notice.		-	ent of State	8
9.		MANAGING MEMBER	<u> </u>							
		MANAGING MEMBE	RS/MANAGERS	10.			ADDITIONS	CHANGES		
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