

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000027013

Entity Name: DREAM 4U, LLC

**FILED**  
**Apr 30, 2013**  
**Secretary of State**

**Current Principal Place of Business:**

3319 STATE ROAD 7  
313  
WELLINGTON, FL 33449

**New Principal Place of Business:**

**Current Mailing Address:**

3319 STATE ROAD 7  
313  
WELLINGTON, FL 33449

**New Mailing Address:**

FEI Number: 20-8706905

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

ABDOLVAHABI, RAMIN M  
3319 STATE ROAD 7  
313  
WELLINGTON, FL 33462 US

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

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: RAMIN ABDOLVAHABI

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: ABDOLVAHABI, RAMIN M  
Address: 3319 STATE ROAD 7. # 313  
City-St-Zip: WELLINGTON, FL 33449

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: RAMIN ABDOLVAHABI

MGR

04/30/2013

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date