L07000055762

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
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Office Use Only



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SECRETARY OF STATE
AND ANASSES FINDING

CORAFLA

LU7000055762

COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: Dreams Come True Investments, LLC

(Name of Resulting Florida Limited Company)

The enclosed Certificate of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 608.439, F.S.

Please return all correspondence concerning this matter to:

Teresa Itwaru		TAS 6	
(Contact Person)		EC 171	
Dreams Come True Inves	stments, LLC	07 MAY 25 SECRETAR VLLAHASS	
(Firm/Company)		SS A	
3084 Bay Laurel Circle North		<u>~</u> ~	
(Address)		بر ب ر بر	
Kissimmee, Fl 34744		OF STATI	
(City, State and Zip Code)		D _{LL}	
For further information concerning this	matter, please call:		
Barbara J. Adams	at (407)	297-3700	
(Name of Contact Person)		nd Daytime Telephone Number)	
Enclosed is a check for the following a	mount:		
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\square \text{\$155.00 Filing Fe} \text{and Certificate of Status}	tes \$180.00 Filing Fe and Certified Copy	ces \$185.00 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRESS:	MAILIN	G ADDRESS:	
Registration Section		ion Section	
Division of Corporations		Division of Corporations	
Clifton Building	P. O. Box		
2661 Executive Center Circle	Tallahass	see, FL 32314	
Tallahassee, FL 32301			

ALLAHASSEE AND SESTED AND SESTED

March 26, 2007

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS TALLAHASSE, FL

This letter is to inform you that Dreams Come True Investments, Inc. has never received their reinstatement notice for 2006. The address recorded was incorrect. Due to these circumstances we are asking that you abate the reinstatement fees. The payment of \$150 is enclosed for the said years. We are doing a conversion from an S-Corp to a LLC for the year 2007. We are enclosing a copy of documents for your viewing. If you have any questions concerning this matter please feel free to contact me at 407 297-3700. The Document # P05000028558.

Your consideration concerning this matter is greatly appreciated.

Cordially,

Barbara J. Adams Accountant

Dreams Come True Investments, Inc. President

Certificate of Conversion For "Other Business Entity" Into Florida Limited Liability Company

are submitted to Tong

This Certificate of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.608.439, Florida Statutes.

5. If not effective on the date of filing, enter the effective date: (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.)
Signed this 26 day of March 20 007
Signature of Authorized Person:
Printed Name: Teresa Itwaru Title: PD
Fees:

\$25.00

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Certificate of Conversion:

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Dreams Come True Investments, LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "L.C.,")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

3084 Bay Laurel Circle North

Kissimmee, FI 34744

3084 Bay Laurel Circle North Kissimmee, FI 34744

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another

business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Teresa Itwaru

3084 Bay Laurel Circle North

Florida street address (P.O. Box **NOT** acceptable)

Kissimmee, FI 34744

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Tarana Ikwawi
- IVICITY	Teresa Itwaru
	3084 Bay Laurel Circle North
	Kissimmee, Fi 34744
MGRM	Felix Itwaru
****	3084 Bay Laurel Circle North
	Kissimmee, Fl 34744
1-1/	
	,
	(Use attachment if necessary)
	(Ose attachment if necessary)
ARTICLE V: Effective date, if other than the (OPTIONAL) (If an effective date is listed, the date must business days prior to or 90 days after the date date is listed.	pe specific and cannot be more than five
REQUIRED SIGNATURE:	
() (o T)	
TOUSH CHOILD)
Signature of a member or an aut	horized representative of a member.
of this document constitutes an affi	08(3), Florida Statutes, the execution irmation under the penalties of perjury ted herein are true.)
Teresa Itwaru	
	ed name of signee
Filing Fees:	
\$125.00 Filing Fee for Articles of of Registered Agent \$ 30.00 Certified Copy (Optional	

\$ 5.00 Certificate of Status (Optional)