

L090000015407

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

**A. LUNT**

FEB 16 2009

**EXAMINER**

Office Use Only



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2009 FEB 13 PM 1:47  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

MyCorporation

An Intuit Company

21215 Burbank Blvd. Ste. 400  
Woodland Hills, CA 91367

intuit

Toll-Free: 888-692-6771 | Direct: 818-436-8225 | FAX: 818-879-8005

E-mail: info@mycorporation.com

## ROUTINE SERVICE FILING REQUEST

Wednesday, January 21, 2009

Division of Corporations  
Florida Department of State  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

FILED  
2009 FEB 13 PM 1:47  
TALLAHASSEE, FLORIDA  
OFFICE OF THE CLERK

Re: ***DreamWeaver Solutions LLC***

Ladies and Gentlemen:

Please find enclosed for filing Articles of Organization for the above referenced company.

Enclosed is a check in the amount of \$155.00 for filing and for a **certified copy**.

Please return the **certified copy** to the address below.

Thank you for your assistance.

Sincerely,

MyCorporation, an Intuit Company

**Attn: Fulfillment Dept.**

21215 Burbank Blvd. Ste. 400  
Woodland Hills, CA 91367

**Articles of Organization  
For  
DreamWeaver Solutions LLC  
Florida Limited Liability Company**

**ARTICLE I - Name:**

The name of the Limited Liability Company is DreamWeaver Solutions LLC.

**ARTICLE II - Address:**

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

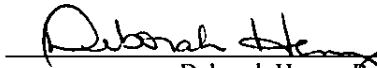
12137 Tree Haven Ave  
Gibson, FL 33534

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

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

Deborah Henry  
12137 Tree Haven Ave  
Gibson, FL 33534

*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.*

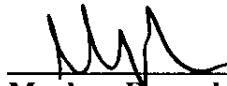


Deborah Henry, Registered Agent

**ARTICLE IV - Management:**

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

Deborah Henry  
12137 Tree Haven Ave  
Gibson, FL 33534



Meghan Record, Organizer

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

2009 FEB 13 PM 1:48

FILED