

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **DREAM HOME REALTY & DESIGN LLC**

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DANILO SANTANA

Name of Person

US TAX CONSULTING INC

Firm/Company

5401 S. KIRKMAN RD. STE. 105

Address

ORLANDO, FL 32819

City/State and Zip Code

DANILO@LOWTAX.US

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DANILO SANTANA

Name of Person

at (**407**) **674-8969**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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DREAM HOME REALTY & DESIGN LLC

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If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	ESTEVEZ, HUMBERTO S	1347 SAWGRASS POINTE DR	☐ Add
		ORLANDO, FL 32824	☒ Remove
MGRM	ESTEVEZ, ROSEMERI C	1347 SAWGRASS POINTE DR	☐ Add
		ORLANDO, FL 32824	☒ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

Dated

NOVEMBER 4TH, 2013

Signature of a member or authorized representative of a member

DANILO SANTANA - ACCOUNTANT

Typed or printed name of signee

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Filing Fee: \$25.00

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