Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : FASTKIT CORP

Account Number : 120100000009

Phone : (305)599-0839 Fax Number : (305)592-9591

**Enter the email address for this business entity to be used for sture annual report mailings. Enter only one email address

Email Address:

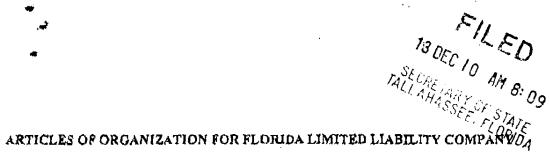
FLORIDA LIMITED LIABILITY CO. DREAM STARTS INVESTMENT IV, LLC

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\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help



ARTICLE 1 - Name:

The name of the Limited Liability Company is:

DREAM STARTS INVESTMENT IV, LLC

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

ARTICLE II - Address:

The mailing address and arect address of the principal office of the Limited Liability Company in:

Principal Office Address;	Mailing Address:	
4960 NW 165 STREET, UNIT B-1	4960 NW 165 STREET, UNIT B-0	
MIAMI GARDENS, FL 33014	MIAMI GARDENS, FL 33014	
ARTICLE III - Registered Agent, Registered Office, (The Limited Liability Company cannot serve as its own Registances entity with an active Florida registration.)	& Registered Agent's Signature: stared Agent, You must designate an individual or	
The name and the Florida street address of the registered	i agent are:	
alexis a. Tel	IEDA	
Name		
4960 NW 165 STR	eet, unit B-1	
Florida street address (P.O.	Box NOT receptable)	
miami garden	is, Fl. 33014	
City, State, and Zi	p	
Having been named as registered agent and to accept service a company of the place designated in this certificate. I hereby accept this capacity. I further agree to comply with the provision or formance of my duties, and I am familiar with and accept the provided for in Chapter 608, F.S.	cept the appointment as registered agent and agree to no of all statutes relating to the proper and complete	
Regisiered Agent's Signature (REQUIRED)		

(CONTINUED) Page 1 of 2

ARTICLE IV- Manager(s) or Mana The name and address of each Manage	
Title: "MOR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	alexis a. Tejeda
	4960 NV 165 STREET, UNIT B-1 MIAMI GARDENS, FL 33014
;	

(Use attachment if necessary)	
ARTICLE V: Effective date, if other to (If an effective date is listed, the date business days prior to or 90 days after	must be specific and cannot be more than five
REQUIRED SIGNATURE	Uns.
Signature of a december or an ar	athorized representative of a member.
constitutes an affirmation under the pena	Florida Statutes, the execution of this document lities of perjury that the facts stated herein are true, united in a document to the Department of State ded for in a.817.155, F.S.)

ALEXIS A. TEJEDA
Typed or printed name of signee