

L14000029475

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

W14-7273

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Called 2/20/14
Spoke w/ Charles
Murray OK for me
to take out what
he had in Art VI

which was not acceptable.

Office Use Only

(Articles of Organization
Attached & List of
Member Contributions
attached)



600255872256

L14-29475

01/24/14--01023--015 **130.00

NO
LD9-17842
DREAM HOME
SOLUTIONS, LLC

FILED
14 FEB 20 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FEB 20 2014 ✓

N. CAUSSEAU

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: REI Dream Home Solutions LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Charles Murray

Name of Person

REI Dream Home Solutions LLC

Firm/Company

297 South Marion Avenue

Address

Lake City, Florida 32025

City/State and Zip Code

murraycharles@bellsouth.net

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

For further information concerning this matter, please call:

Charles Murray

at

386

984-7226

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐

\$125.00 Filing Fee

☒

\$130.00 Filing Fee &
Certificate of Status

☐

\$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐

\$160.00 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 4, 2014

CHARLES MURRAY
REI DREAM HOME SOLUTIONS LLC
297 SOUTH MARION AVENUE
LAKE CITY, FL 32025

SUBJECT: DREAM HOME SOLUTIONS LLC
Ref. Number: W14000007273

We have received your document for DREAM HOME SOLUTIONS LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.," also are no longer acceptable.

The document of the company is L09000017842 "DREAM HOME SOLUTIONS, LLC"

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Nanette Causseaux
Regulatory Specialist II Supervisor

Letter Number: 614A00002518

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

~~Dream Home Solutions LLC~~ CFM REI LLC

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

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

297 South Marion Avenue
Lake City, Florida 32025

297 South Marion Avenue
Lake City, Florida 32025

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:

Charles Murray

Name

297 South Marion Avenue

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

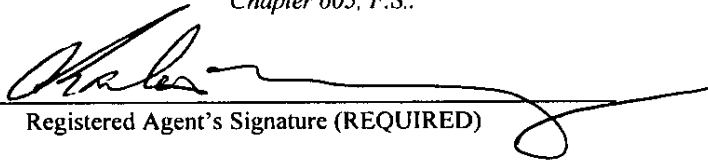
Lake City

FL 32025

City

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 605, F.S.


Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Charles Murray

297 South Marion Avenue

Lake City, Florida 32025

AMBR

Young C. Park

484 SW San Juan Place

Lake City, Florida 32025

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TALLAHASSEE FLORIDA

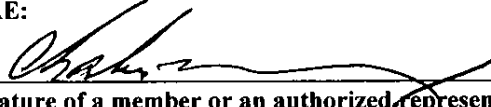
(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: February 1, 2014 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.
(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Charles F. Murray

Typed or printed name of signer

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)