L18000076748

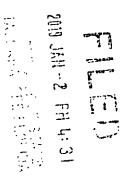
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Document Number)
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P. BRUCE

COVER LETTER

Registration Section

TO:

Division of Corporations	
SUBJECT: Dreamstone Investments, LLC	
(Name of Limited Liability Con	npany)
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:	
Vehano Joseph	
(Contact Person)	_
Dreamstone Investments, LLC	
(Firm/Company)	-
717 N Himes Ave	
(Address)	- Ko
Tampa, FL 33609	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Vehano Joseph 954	2960539
	& Daytime Telephone Number)
Enclosed please find a check made payable to the Florida D \$25 Filing Fee \$25 Filing	Department of State for: g Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section

Division of Corporations

Tallahassee, Florida 32314

P.O. Box 6327

CR2E079 (2/14)

Division of Corporations
Clifton Building
2661 Executive Center Circle

Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

	REAMSTONE INVESTMENTS, LLC	ords of the Florida Department
2. The Florida d L18000076	ocument/registration number assigned to this limite	d liability company is:
	member/manager withdrew/resigned or will withdra	
4. I,	King-Royal Estates Group, LLC , hereby withdr	aw/resign as a
MGR - Jon		
	(Print Title)	283
	liability company and affirm the limited liability co	mpany has been notified of my
resignation in	writing.	
Signature of	Dissociating Member or Resigning Manager	
Filing Fee:	\$25.00 (Required)	

Certified Copy:

\$30.00 (Optional)