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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

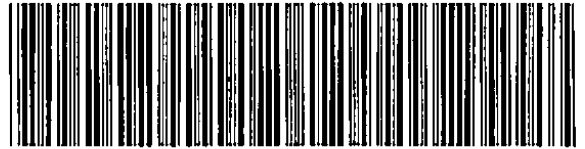
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2020 NOV 16 PM 1:03

12/18/20
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Dream Catering and Decor 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:

MaryAnne Miller
Name of Person

Firm/Company

8804 NW 38th DRIVE unit 4
Address

Coral Springs FL 33065
City/State and Zip Code

Mydreamcater@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MaryAnne Miller at 954 380-0849
Name of Person 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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Dream Catering and Decor LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Act</u>
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AMBR	MaryAnne Huker		
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2804 NW 38th Drive	<input checked="" type="checkbox"/> Add
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Coral Springs FL 33065	<input type="checkbox"/> Remove
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FILED

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Signature

Signature of a member or authorized representative of a member

Mary Anne Miller
Typed or printed name

Typed or printed name of signee

Filing Fee: \$25.00