La3000207784

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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S. CHATHAM
APR 27 2023

01/25/23--01018--015 **185.00







Filed. 3/18/23

FLORIDA DEPARTMENT OF STATE Division of Corporations

February 14, 2023

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LISSETTE C ARENCIBIA 13812 SW 8TH ST #135 MIAMI, FL 33184 US

SUBJECT: DREAM INVESTORS LLC

Ref. Number: W23000020320

We have received your document for and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), s.607.1622(9) and/or 607.1622(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

If you have any further questions concerning your document, please call (850) 245-6052.

KAIN COSTELLO Regulatory Specialist II New Filing Section

Letter Number: 523A00003548

COVER LETTER

TO:	New Filing S Division of C					
CHDI	ECT: Dream l	•				
SUBJ	ECI:	(Name of Re	sulting	g Florida Limit	ed Cor	mpany)
The en	nclosed Article ess Entity" into	s of Conversion, Artic a "Florida Limited L	les o iabili	of Organization	on, ar '`` in a	nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please	return all corr	espondence concernin	g thi	s matter to:		
Lissett	ie C. Arencibia					
	- -	(Contact Person)				
Dream	Investors LLC					
		(Firm/Company)				
13812	SW 8th Street #	‡ 135				
		(Address)				
Miami,	, FL 33184	. ,				
	((City, State and Zip Code)		·		
lissette	418@gmail.con	• •				
E-n	nail Address: (to b	e used for future annual re	port n	otifications)		
Ess 6.				1 11		
		on concerning this ma	-	-		
Lissett	e C. Arencibia		_at (.305	505-2	2723
	(Name of Conta	ct Person)		(Area Code)	(Day	rtime Telephone Number)
Enclos dollars	sed is a check f s and drawn on	or the following amou a bank located in the	nt: (a Unite	All checks pred States)	rocess	sed by this office must be payable in US
(\$25 foi & \$125	0.00 Filing Fees r Conversion for Articles nization)	\$155.00 Filing Fees and Certificate of Status		\$180.00 Filing I Certified Copy		■\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add			9	Strect	t Address:
	New Filing So					Filing Section
	Division of C P.O. Box 632					ion of Corporations Centre of Tallahassee
		•				CHUC OF FAHAHASSEC

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

Articles of Conversion For "Other Business Entity"

Into

Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605:1045. Horida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: <u>Dream Investors Inc.</u>
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
11/13/2019
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Dream Investors LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after the date this document is filed by the Florida Department of State.)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
5. The plan of conversion has been approved in accordance with all applicable statutes.
6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to

which such members are entitled under ss. 605,1006 and 605,1061-605,1072, F.S.

\$5.00 (Optional)

Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

(Must contain the words "I		
	Limited Liability Company, "L.L.C.," or "LL.C.")	
TICLE II Add	ess of the principal office of the Limited Li	38 70 7
e mailing address and street addre	are of the principal office of the Limited Li	
s manning address, and saleet address	ess of the principal office of the Elimited Li	aomiy Company
ncipal Office Address:	Mailing Address:	
212 CVAL Oth Circuit #425	···	
312 SW 8th Street #135 mi, FL 33184	13812 SW 8th Street #135	
iii ii	Miami, FL 33184	

Lissette C. Arenci	ibia	
	Name	
	reet #135	
13812 SW 8th Str		
	ddress (P.O. Box NOT acceptable)	
	ddress (P.O. Box <u>NOT</u> acceptable) FL ³³¹⁸⁴	
Florida street ac	ddress (P.O. Box <u>NOT</u> acceptable) FL 33184 Tity Zip	
Florida street ac Miami Ci	FL ³³¹⁸⁴ City Zip	
Florida street ac Miami Ci daving been named as registered of	FL 33184 Tity Zip agent and to accept service of process for the	e ahove stated lim
Florida street ac Miami Ci Having been named as registered of liability company at the place de	FL ³³¹⁸⁴ City Zip	he appointment o
Florida street ac	FL ³³¹	84

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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$\Lambda \Lambda$	111	. I . F	'. I	V -

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

"AMBR" = Authorized Member		
"MGR" = Manager MGR	Lissette C. Arencibia	
	13812 SW 8th Street #135	
	Miami, FL 33184	
MGR	Frances Darquea Eberhardt	'
	13812 SW 8th Street #135	,
	Miami, FL 33184	
		٠.,
(Use attachment if necessary)		
(ose diadomnem ir necessary)		
LE V: Other provisions, if any.		
LE V: Other provisions, if any.		
LE V: Other provisions, if any.		, <u>.</u>
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LE V: Other provisions, if any.		
REQUIRED SIGNATURE:		
REQUIRED SIGNATURE:		
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REQUIRED SIGNATURE:		
REQUIRED SIGNATURE: Signature of a member or as	n authorized representative of a member	
Signature of a member or at This document is executed in a coordance we any false information submitted in a document.		vare :
Signature of a member or at This document is executed in accordance w	n authorized representative of a member	ware (

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