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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

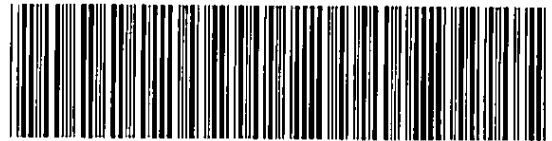
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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06/21/24--01015--005 \*\*125.00

2024 JUN 21 PM 12:47

**COVER LETTER**

**TO: New Filing Section  
Division of Corporations**

**SUBJECT:** Big Dreams Realty 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:

David Roberts

Name of Person

Registered Agents Inc - Sunshine Corporate Filings

Firm/Company

7901 4th St N, STE 300

Address

St. Petersburg, FL 33702

City/State and Zip Code

reneehilario@kw.com

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

For further information concerning this matter, please call:

Renee Hilario 217 819-0521  
Name of Person at (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**  
New Filing Section  
Division of Corporations

**Street Address**  
New Filing Section Division  
The Centre of Tallahassee

2024 JUN 21 PM 12:47  
RECEIVED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL

1011 0412

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Big Dreams Realty LLC

(Must contain 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:**

KW Suncoast

4152 Lakewood Ranch Blvd

Bradenton, 34211

**Mailing Address:**

Registered Agents Inc - Sunshine Corporate

7901 4th St N, STE 300

St. Petersburg, FL 33702

**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:

Registered Agents Inc

Name

7901 4th St N, STE 300

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

St. Petersburg

FL

33702

City

State

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.*

David Roberts

Registered Agent's Signature (REQUIRED)

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