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SECRETARY OF STATE
ALL AHASSEE, FLORIDA

J. BRYAN

NOV - 9 2010

**EXAMINER** 

#### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: DREAMBOTS, LLC.
Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please return all correspondence concerning this matter to the following:
CHARLES W. WARD
Name of Person
DREAMBOTS, LLC.
Firm/Company Firm/Company
Address  RICHMOND, VA 23219
Address
City/State and Zip Code
BWARD@SEGWAYOF RICHMOND.BIZ  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
KIMBERLY CHRISTIE at (804) 343-1850
Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclosed is a check for the following amount:  \$\int_{\$125.00 \text{ Filing Fee}} \int_{\$130.00 \text{ Filing Fee & Certificate of Status}} \int_{\$Certificate \text{ Opy}} \int_{\$160.00 \text{ Filing Fee, Certificate of Status}} \int_{\$Certified \text{ Copy}} \int_{\$Certified \t

#### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	MITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:  DREAMBOTS, LLC,	
1.	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
co	Fname unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written insent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability ompany," "L.L.C," "LLC.")	
	VIRGINIA  (Jurisdiction under the law of which foreign limited liability company is organized)  3. 26-1645185  (FEI number, if applicable)	
4.	11/28/07  (Date of Organization)  5. PERPETUAL  (Duration: Year limited liability company will cease to exist or "perpetual")	
6.	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7.	1301 E. CARY STREET	
	RICHMOND, VA 23219  (Street Address of Principal Office)	
8.	If limited liability company is a manager-managed company, check here	
9.	The name and usual business addresses of the managing members or managers are as follows:  CHARLES W. WARD - 1301 E. CARY STREET, RICHMOND, VA 23219  JEFFREY W. JONES - 1301 E. CARY STREET, RICHMOND, VA 23219	
the	D. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in a jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a inslation of the certificate under oath of the translator must be submitted.)	
11	Nature of business or purposes to be conducted or promoted in Florida:	
	Signature of a member or an authorized representative of a member.  (In accordance with section 608.408(3), F.S., 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.)	

Typed or printed name of signee

#### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Dreambots, LLC	
If unavailable, the alternate to be used in the state of Florida is:	
	O NOV
2. The name and the Florida street address of the registered agent and office are:	TASSE A P
Incorp Services, Inc.	er Flor
17888 67th Court North Florida Street Address (P.O. Box NOT ACCEPTABLE)	ATE .
Loxahatchee FL 33470 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 608, Florida Statutes.

Lie for morp gavias, Inc. (Signature)

\$ 100.00 Filing Fee for Application
 \$ 25.00 Designation of Registered Agent
 \$ 30.00 Certified Copy (optional)
 \$ 5.00 Certificate of Status (optional)

## Commonwealth of Hirginia



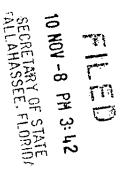
### State Corporation Commission

I Certify the Following from the Records of the Commission:

A certificate of organization was issued by the Commission to Dreambots, LLC, a limited liability company formed under the laws of VIRGINIA, effective as of November 28, 2007.

As of the date below, articles of cancellation have not been filed in this office by Dreambots, LLC, a Virginia limited liability company.

Nothing more is hereby certified.





Signed and Sealed at Richmond on this Date: November 3, 2010

Joel H. Peck, Clerk of the Commission