M130000006435

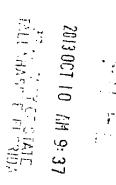
(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	- · · · · · · · · · · · · · · · · · · ·
(Ci	ty/State/Zip/Phone	÷#)
PICK-UP	WAIT	MAIL
· (Bu	usiness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



200251412742

09/18/13--01022--008 **125.00



J. SAULSBERRY EXAMINER OCT 10 2013

COVER LETTER

Division of Corporations	
SUBJECT: DREAM HOMES CASH, LLC	
Name of Limited Liability Company	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certific Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in	
Please return all correspondence concerning this matter to the following:	
LYNNETTE SOTO	
Name of Person	
Firm/Company	
8477 LAKE AMHURST TRAIL	
Address	
ORLANDO, FL 32829	
City/State and Zip Code	7
leenena214@aol.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
LYNNETTE SOTO $at (407)$ 535-0948	
Name of Person Area Code & Daytime Telephone Number	
MAILING ADDRESS: STREET ADDRESS: Division of Corporations Division of Corporations	
Registration Section Registration Section P.O. Box 6327 Clifton Building	
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amount: \$\sigma\$	

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:

1. DREAM HOMES CASH, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability")	
(If name unavailable, enter alternate name adopted for the purpose of transacting bus consent of the managers or managing members adopting the alternate name. The alternate name, "L.L.C," "LLC.")	
2. NEVADA (Jurisdiction under the law of which foreign limited liability company is organized) 3. (Fig. 1)	El number, if applicable)
4. 7/31/2013 (Date of Organization) 5. PERPETUAL (Duration: Year exist or "perpet	r limited liability company will cease to
6. 8/31/2013 (Date first transacted business in Florida, if prior to reging (See sections 608.501 & 608.502 F.S. to determine penals)	stration.)
7. 8477 LAKE AMHURST TRAIL	ty liability)
ORLANDO, FL 32829 (Street Address of Principal Office)	
8. If limited liability company is a manager-managed company, check	
9. The name and usual business addresses of the managing members of LYNNETTE SOTO 8477 LAKE AMHURST TRAIL, ORLAN	_
GELNNIE L. CRESPO 8477 LAKE AMHURST TRAIL	, ORLANDO, FL 32829
10. Attached is an original certificate of existence, no more than 90 days old, duly authen the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. I translation of the certificate under oath of the translator must be submitted.)	fthe certificate is in a foreign language, a
11. Nature of business or purposes to be conducted or promoted in Flo	orida: INENE EOTATE
Signature of a member or an authorized represent (In accordance with section 608.408(3), F.S., the execution of this document penalties of perjury that the facts stated herein are true. I am aware that a document to the Department of State constitutes a third degree felo	t constitutes an affirmation under the ny false information submitted in a

Typed or printed name of signee

LYNNETTE SOTO

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:	
DREAM HOMES CASH, LLC	
If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are	2013 OCT
LYNNETTE SOTO	308
(Name)	
8477 LAKE AMHURST TRAIL	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	· 5 · 9
ORLANDO FL 32829	- 55
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.

(Signature)

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





I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **DREAM HOMES CASH LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since July 31, 2013, and is in good standing in this state.

Electronic Certificate
Certificate Number: C20131002-1941
You may verify this electronic certificate
online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on October 2, 2013.

ROSS MILLER Secretary of State