

M15000008035

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

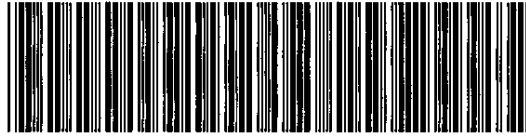
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W15-60269

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09/11/15--01007--001 **70.00

10/05/15--01020--017 **55.00

FILED
2015 OCT -7 P 4: 07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 08 2015
D. BRUCE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 1, 2015

FLORIDA DREAMS CAPITAL GROUP
ANDRIANA MONTES
2704 REW CIRCLE, STE 102
OCOOEE, FL 34761

SUBJECT: PROMESAS LLC
Ref. Number: W15000060269

We have received your document for PROMESAS LLC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please accept our apology for failing to mention this in our previous letter.

We are enclosing the proper form(s) with instructions for your convenience.

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

There is a balance due of \$55.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 015A00020819

2015 OCT -7 P 4: 07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 25, 2015

FLORIDA DREAMS CAPITAL GROUP
ANDRIANA MONTES
2704 REW CIRCLE, STE 102
OCOE, FL 34761

SUBJECT: PROMESAS LLC
Ref. Number: W15000060269

2015 OCT -7 P 4: 07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

We have received your document for PROMESAS LLC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 415A00020277



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 14, 2015

FLORIDA DREAMS CAPITAL GROUP
ANDRIANA MONTES
2704 REW CIRCLE, STE 102
OCOE, FL 34761

SUBJECT: PROMESAS LLC
Ref. Number: W15000060269

2015 OCT -1 P 4: 07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

We have received your document for PROMESAS LLC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 215A00019316

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: PROMESAS 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:

FLORIDA DREAMS CAPITAL GROUP, INC.

Name of Person

PROMESAS LLC

Firm/Company

2704 REW CIRCLE SUITE 102

Address

OCOE, FL 34761

City/State and Zip Code

ADRIANA@FLORIDADREAMSREALTY.COM

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

For further information concerning this matter, please call:

ADRIANA M MONTES

321

689-6258

at ()

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. PROMESAS LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. DELAWARE 3. 58091-85
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 08/24/2015
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. _____
2704 REW CIRCLE SUITE 102 OCOEE, FL 34761
(Street Address of Principal Office)


6. _____
2704 REW CIRCLE SUITE 102 OCOEE, FL 34761
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: FLORIDA DREAMS CAPITAL GROUP, INC.
Office Address: 2704 REW CIRCLE SUITE 102
OCOEE, Florida 34761
(City) (Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

FLORIDA DREAMS REALTY GROUP, INC
ADRIANA M MONTES, PRESIDENT
2704 REW CIRCLE SUITE 102 OCOEE, FL 34761

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)


Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

ADRIANA M. MONTES
Typed or printed name of signee

FILED
2015 OCT - 7 P 4: 07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "PROMESAS LLC" IS DULY FORMED UNDER THE
LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A
LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF
THE TWENTY-EIGHTH DAY OF SEPTEMBER, A.D. 2015.



5809185 8300

SR# 20150289156

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 10142826

Date: 09-28-15