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COVER LETTER

TO:

Registration Section

Division of Corporations	
SUBJECT: DAY DREAM HONE SO	ame of Limited Liability Company
The enclosed "Application by Foreign Limited Liability	ty Company for Authorization to Transact Business in Florida," Certificate of we referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter	er to the following:
ELIOT BROWN	Name of Person
DAY DREAM HOME	SOCUTIONS, C.LC. Firm/Company
3800 WASHINGTON RD,	APT 1007, Address
WOST PALM BOTACH.	City/State and Zip Code
ELIOT, 1320WN & GA E-mail address: (to	be used for future annual report notification)
For further information concerning this matter, please	call:
ELICT BROWN Name of Contact Person	at (954) 253-3361 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: \$\sum \frac{1}{2} \\$125.00 \text{ Filing Fee} \sum \\$130.00 \text{ Filing Fe} \text{ Certificate of State}	

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

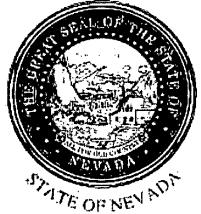
IN COMPLIANCE WITH SECTION 608,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY

COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(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. A C JADA (Jurisdiction under the law of which foreign limited liability ompany is organized) 3. WA (FEI number, if applicable)
4. NA (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 3800 WASHINGTON RD, APT 1007
WIST PALM REACH FI 33 405 (Street Address of Principal Office)
6. JACO WASHINGTON OD, APT 100?
(Mailing Address)
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Vida 8 Company Real Estate Carp 577
Name: Name: Vida 8 Company Real Estate Carp From Company Real
Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation 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)
(Registered agent's signature)
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
COLIOT BROWN, MANAGER
3400 WASHINGTON RD, APT 1007
WEST PALM 13 JACH, FL, 33405
 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)
672-
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.
CILLATE TOWARD

Typed or printed name of signes

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, 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, **DAY DREAM HOME SOLUTIONS, 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 April 25, 2016, and is in good standing in this state.

AE VADA

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on May 10, 2016.

BARBARA K. CEGAVSKE
Secretary of State

Electronic Certificate
Certificate Number: C20160510-2459
You may verify this electronic certificate
online at http://www.nvsos.gov/