M1700000015

		•					
(Requestor's Name)							
(Address)							
(Address)							
(Cit	ty/State/Zip/Phone	e #)					
		·					
PICK-UP	☐ WAIT	MAIL					
	siness Entity Nar	ma)					
(Du	isiness Littly Nai	ne)					
(Do	cument Number)						
Certified Copies	_ Certificates	s of Status					
Special Instructions to	Filing Officer:						
,	J						

Office Use Only



800293668488

12/30/16--01001--022 **125.00

16,0EC 30 AM II: 18

T WASHINGTON JAN 3 2017

COVER LETTER

TO:

Registration Section

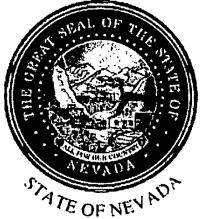
Division	of Corporation	ns					
SUBJECT:	DREA	MLAND	HOLD;	NGS, LL	<u> </u>		
			Name of I	Limited Liability C	ompany		
						insact Business in Florida," Cer y company to transact business	
Please return all co	orrespondence	concerning this i	matter to the	following:			
		WILFR	EDO F	si Si LV	Α		
		•	Na	ime of Person			
-			Fii	rm/Company			
	~ .∈ 0		D C I A	T 0			
-	115 K	MICKA	DELLA	Address			
				Address			
-		DEB	ARY, F	ate and Zip Code	3		
			City/St	ate and Zip Code			
	<u>wi</u>	LL. Si LV	a.Je	@ 9 ma	-?L. (com	
WILL. Silva. JR @ 9 mail. Com E-mail address: (to be used for future annual report notification)							
For further inform	ation concernin	g this matter, pl	ease call:				
WILF	PEDO F	SILVA	<u> </u>	_at (_201)_3	41-9818 time Telephone Number	
	Name o	of Contact Perso	n	Area Code	Day	time Telephone Number	
MAILIN Division e Registrati P.O. Box	G ADDRESS: of Corporations ion Section				STREET Division of Registrati Clifton Br 2661 Exe	ADDRESS: of Corporations on Section	
Enclosed is a chec	k for the follow 10 Filing Fee	ving amount: □ \$130.00 Fil Certificate of	-	☐ \$155.00 Filing Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Certific of Status & Certified Copy	cate

· 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:

	D HOLDINGS LLC		
(Name of Forei	gn Limited Liability Company; must include "Limite	ed Liability Company," "L.L.C.," or "L	LC.")
(If name unavailable, enter alte Liability Company," "L.L.C,"	ernate name adopted for the purpose of transacting b or "LLC.")	usiness in Florida. The alternate name	must include "Limited
2. NEVADA (Jurisdiction under the law of company is organized)	3	31 - 4370457 (FEI number, if applicable)	
4			
	(Date first transacted business in Florida, if p (See sections 605.0904 & 605.0905, F.S. to dete	rior to registration.) ermine penalty liability)	
5	715 RIVIERA BELLA D	R,	<u>ੋਂ</u> ਰ
	DEBARY FL 32713 (Street Address of Principal Office)	•	DEC .
	(Street Address of Principal Office)		FIL DEC 30 Junassi
6			f * *
	(Mailing Address)		AM III:
7 Name and atreat address	· -	annuckia)	
	of Florida registered agent: (P.O. Box NOT a	(cceptable)	
Name:	WILFREDO F. SILVA		
Office Address:	415 KINIERA BELLA DI	<u> </u>	
	715 RIVIERA BELLA DE DEBARY (City)	, Florida <u>32713</u>	
Registered agent's accept	(City) ance:	(Zip code)	
this application, I hereby a	Willed =	agree to act in this capacity. I ful formance of my duties, and I am f	rther agree to comply
	(Registered agent's signi	ature)	
8. The name, title or capac	city and address of the person(s) who has/have a	authority to manage is/are:	
WILFRE	OF SILVA MANAGE	<u>)</u>	
	Will f=	foreign language, a translation of the	
	Signature of an authorized	person	
This document is executed submitted in a document to	in accordance with section 605.0203 (1) (b), Flo	orida Statutes. I am aware that any f	alse information

WILFREDO F. SILVA Typed or printed name of signee 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, **DREAMLAND HOLDINGS**, **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 October 5, 2016, and is in good standing in this state.

AND THE OWNER OF THE OWNER OF THE OWNER OF THE OWNER O

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on December 6, 2016.

Boulans K. Cegarske

BARBARA K. CEGAVSKE Secretary of State

Electronic Certificate
Certificate Number: C20161206-2282
You may verify this electronic certificate
online at http://www.nvsos.gov/