

PO7000026315

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

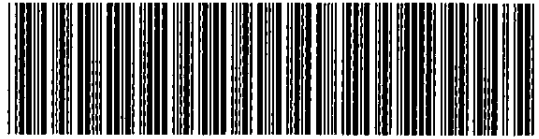
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/08/08--01059--008 **87.50

PA Design

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 FEB - 12 PM 3:59

T. Roberts FEB 12 2009



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 11, 2008

JUAN CARLOS CUELLAR
7110 SW 142ND AVENUE
MIAMI, FL 33183

SUBJECT: DREAM HOME CONTRACTORS, INC.
Ref. Number: P07000026315

We have received your document for DREAM HOME CONTRACTORS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records reflect the registered agent as A&A REGISTERED AGENT, INC. Please correct your document.

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) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 708A00060021

RECEIVED
2009 FEB 12 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dream Home Contractors, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P07000026315

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Juan Carlos Cuellar

(Name of Person)

(Name of Firm/Company)

7110 SW 142nd Avenue

(Address)

Miami, Florida 33183

(City/State and Zip Code)

For further information concerning this matter, please call:

Juan Carlos Cuellar

(Name of Person)

at (305) 975-0127

(Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:

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

Mailing Address:

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 FEB -12 PM 3:55

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, _____

~~Alayon & Associates, P.A.~~ *A & A Registered Agent, Inc.*

(Name of Registered Agent)

hereby resigns as Registered Agent for _____

Dream Home Contractors, Inc.

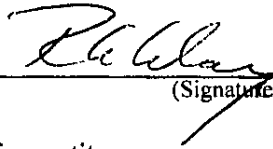
(Name of Corporation)

P07000026315

(Document Number, if known)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.



(Signature of Resigning Agent)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

Fee for filing this document:

\$87.50 - Active corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/
withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314