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(Requestor's Name)				
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(0):	Obj. 101	- 40		
. (City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
<b>\</b> =		··- <b>,</b>		
(Doci	ument Number)			
Certified Copies	Certificates	s of Status		
Special Instructions to Fi	ling Officer			
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Office Use Only



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SECKETARY OF STATE ON JAN 30 PH 12: 29

SALLAHASSEE, FLORIDA DIVISION ON JAN 30 PH 12: 29

At

## **COVER LETTER**

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:	Dreamobi		
Enclosed are an orig	(PROPOSED CORPORA)		
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	& Certificate of Status
FROM:	Nayne Aar	ron Burnam Printed or typed) Pointe Blud	
-	Tallahassee City,	FL 32308 State & Zip  7-7983	?

NOTE: Please provide the original and one copy of the articles.

Signature/Incorporator