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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

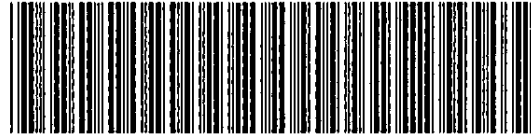
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
13 AUG 28 AM 11:25

Ps 9/3/13

**COVER LETTER**

**TO:** Charter Section  
Division of Corporations

**SUBJECT:** Dream Coast Management Inc.  
Name of Resulting Florida Profit Corporation

The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.

Please return all correspondence concerning this matter to:

Dr. Annett Frank

Contact Person

Dream Coast Management LLC

Firm/Company

1811 SW 46th Terrace

Address

Cape Coral, FL 33914

City, State and Zip Code

hariola@comcast.net

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

For further information concerning this matter, please call:

Dr. Annett Frank at (239) 284 - 6215

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- \$105.00 Filing Fees     \$113.75 Filing Fees and Certificate of Status     \$113.75 Filing Fees and Certified Copy     \$122.50 Filing Fees, Certified Copy, and Certificate of Status

**STREET ADDRESS:**

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

**MAILING ADDRESS:**

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

**CERTIFICATE OF CONVERSION**

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

For  
„Other Business Entity“  
Into  
Florida Profit Corporation

13 AUG 28 AM 11:25

This Certificate of Conversion and attached Articles of Incorporation are submitted to convert the following „Other Business Entity“ into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

1.) The Name of the „Other Business Entity“ immediately prior to the filing of this Certificate of Conversion is: **DREAM COAST MANAGEMENT LLC**  
L10000010236

2.) The „Other Business Entity“ is a: **LIMITED LIABILITY COMPANY**  
first organized, formed or incorporated under the Laws of: **State of Florida**

3.) Date of first organized, formed or incorporated: **01/28/2010**


4.) Now organized, formed or incorporated under the laws of: **N/A**  
(If the jurisdiction of „Other Business Entity“ changed)

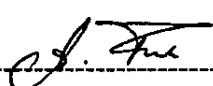
5.) The Name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation shall be: **DREAM COAST MANAGEMENT INC.**

Signed this 26 day of August, 20 13

For Florida Profit Corporation:

For Florida Limited Liability Company:

  
-----  
Printed Name: Dr. Annett Frank  
Title: President

  
-----  
Printed Name: Dr. Med. Annett Frank  
Title: MGRM

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13 AUG 28 AM 11:25

**ARTICLES OF INCORPORATION  
OF  
DREAM COAST MANAGEMENT INC.**

In compliance with Chapter 607 and/or Chapter 621, F.S.(Profit), the undersigned incorporator hereby adopts the following Articles of Incorporation:

**ARTICLE I:**

The Name of the Corporation shall be:

**DREAM COAST MANAGEMENT INC.**

**ARTICLE II:**

The Principal Place of Business Address is:

1202 SE 8th PLACE, SUITE # B  
CAPE CORAL, FL 33990

The Mailing Address of the Corporation is:

1811 SW 46th Terrace  
CAPE CORAL, FL 33914

**ARTICLE III:**

The Purpose for which the Corporation is organized is:

THE GENERAL NATURE OF THE BUSINESS FOR THIS CORPORATION  
AND THE BUSINESS TO BE TRANSACTED ARE AS FOLLOWS: TO TRANSACT  
ANY AND ALL LAWFUL BUSINESS AS A REAL ESTATE COMPANY.

**ARTICLE IV:**

The Number of Shares the Corporation is authorized to issue is:

10 SHARES AT \$ 100.00 PAR VALUE/SHARE

**ARTICLE V:**

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DIVISION OF CORPORATIONS

The initial Officer(s) and/or Director(s) of the Corporation is/are:

13 AUG 29 AM 11: 25

Title: P/D/S/T  
DR. ANNETT FRANK  
1811 SW 46th TERRACE  
CAPE CORAL, FL 33914

**ARTICLE VI:**

The Name and Florida Street Address of the Registered Agent is:

DR. ANNETT FRANK  
1811 SW 46th TERRACE  
CAPE CORAL, FL 33914

**ACKNOWLEDGMENT:**

Having been named as registered agent to accept service of process for the above stated Corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

  
\_\_\_\_\_  
Signature Registered Agent

08/26/13  
Date

**ARTICLE VII:**

The Name and Address of the Incorporator is:

DR. ANNETT FRANK  
1811 SW 46th TERRACE  
CAPE CORAL, FL 33914

I submit this document and affirm that the facts stated herein are true. 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.

  
\_\_\_\_\_  
Signature Incorporator

08/26/13  
Date