

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000037585

FILED
Oct 02, 2009
Secretary of State

Entity Name: DREAM TEAM DELAND SPV, LLC

Current Principal Place of Business:

C/O SANDER MEDNICK
5835 21ST WAY
BOCA RATON, FL 33496

New Principal Place of Business:

Current Mailing Address:

C/O SANDER MEDNICK
5835 21ST WAY
BOCA RATON, FL 33496

New Mailing Address:

FEI Number: 20-2708439 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MEDNICK, SANDER
5835 21ST WAY
BOCA RATON, FL 33496 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: SANDER MEDNICK

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: WACHTELL, MICHAEL L
Address: 1000 WILSHIRE BLVD, SUITE 1500
City-St-Zip: LOS ANGELES, CA 90017

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Delete
Name: MEDNICK, SANDER
Address: 5835 21ST WAY
City-St-Zip: BOCA RATON, FL 33496

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SANDER MEDNICK

MGR

10/02/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date