

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000006474

**FILED**  
**Jan 13, 2010**  
**Secretary of State**

**Entity Name:** THE DREAM MAKERS CAPITAL INVESTMENT, LLC

**Current Principal Place of Business:**

1500 UNIVERSITY DRIVE  
243 & 253  
CORAL SPRINGS, FL 33071 US

**New Principal Place of Business:**

**Current Mailing Address:**

1500 UNIVERSITY DRIVE  
243 & 253  
CORAL SPRINGS, FL 33071 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:**

WILLIAMS, YOLETTE T  
1500 UNIVERSITY DRIVE  
243 & 253  
CORAL SPRINGS, FL 33071 US

**Name and Address of New Registered Agent:**

PERLMAN, JONATHAN  
100 SE 2ND STREET  
SUITE 4400  
MIAMI, FL 33131 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: /S/JONATHAN PERLMAN

01/13/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: WILLIAMS, YOLETTE T  
Address: 1500 UNIVERSITY DRIVE, SUITE 243  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: MGRM  
Name: CHERIZARD, JACQUELIN  
Address: 1500 UNIVERSITY DRIVE, SUITE 243  
City-St-Zip: CORAL SPRINGS, FL 33071

I hereby 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: /S/JONATHAN PERLMAN

REC.

01/13/2010

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