

42000009277

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 20 2015
T. LEMIEUX

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Dream team Radio LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jason Green
Name of Person

Firm/Company

2511 Luther Rd. #633
Address

Punta Gorda, FL 33983
City/State and Zip Code

JSTYLEX1023@AOL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jason Green at (239) 601-1310
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

14 MAY 19 PM 4:19

11 MAY 2014
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

May 5, 2014

JASON GREEN
2511 LUTHER RD #633
PUNTA GORDA, FL 33983

SUBJECT: DREAMTEAM RADIO LLC
Ref. Number: L12000009277

We have received your document for DREAMTEAM RADIO LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

This is a LLC not a Corporation the document you sent in is not correct. I am sending you the correct document to file.

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) 245-6050.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 914A00009522

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Dream team Radio LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

11665 Collier Blvd #990083
Naples, FL 34116

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

11665 Collier Blvd #990083
Naples, FL 34116

3. 02/12 Date of filing/registration in Florida 4. _____ Document number

5. (a) Jason Green

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

2711 2nd Ave SE

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Naples, FL 34117

(b) Dwayne Harris

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

11665 Collier Blvd ~~34116~~ #990083

NEW Registered Office Address:

Naples, FL 34116

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TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Dwayne Harris

Signature of a member or authorized representative of a member

Dwayne Harris

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Dwayne Harris

Signature of Registered Agent

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

FILING FEE: \$25.00