

P00000047726

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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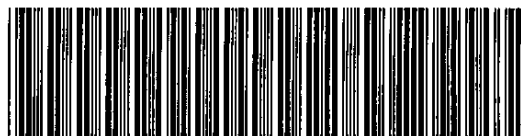
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RA Change  
07/3/07  
DC

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Dream Team Communications, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P000000047726

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Monte Grandon  
(Name of Contact Person)

Dream Team Communications, Inc.  
(Firm/Company)

14234 Richmond Park Avenue  
(Address)

Charlotte, NC 28277  
(City/State and Zip Code)

For further information concerning this matter, please call:

Monte Grandon at ( 704 ) 540-3600  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 15, 2007

MONTE GRANDON  
DREAM TEAM COMMUNICATIONS, INC.  
14234 RICHMOND PARK AVE.  
CHARLOTTE, NC 28277

SUBJECT: DREAM TEAM COMMUNICATIONS, INC.  
Ref. Number: P00000047726

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

The registered agent must sign accepting the designation.

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) 245-6906.

Darlene Connell  
Document Specialist

Letter Number: 107A00033805

NOTICE: The enclosed document is being returned to you because it does not contain the signature of the registered agent. Please sign the document and return it to the Division of Corporations within 60 days of the date of this letter. If you do not sign the document within 60 days, the document will be considered abandoned and the filing fee will be forfeited.



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 17, 2007

MONTE GRANDON  
DREAM TEAM COMMUNICATIONS, INC.  
14234 RICHMOND PARK AVE.  
CHARLOTTE, NC 28277

SUBJECT: DREAM TEAM COMMUNICATIONS, INC.  
Ref. Number: P00000047726

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

The designation of the registered agent must be at a Florida street address.

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) 245-6906.

Darlene Connell  
Document Specialist

Letter Number: 007A00025270

RECEIVED  
07 MAY 14 AM 8:00  
DIVISION OF CORPORATIONS

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Dream Team Communications, Inc.  
2. The principal office address: 14234 Richmond Park Avenue  
Charlotte, NC 28277  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 5/10/2000 Document number: P00000047726

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Monte Grandon - Dream Team Communications, Inc.  
301 - 186th Street  
Sunny Isles Beach, FL 33160

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Arlene Fellerman  
5722 South Flaming Road  
#352  
Cooper City, FL 33330  
(P.O. Box NOT acceptable)

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Monte Grandon  
(Signature of an officer or director)

Monte Grandon - President  
(Printed or typed name and title)

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Arlene Fellerman, CPA  
(Signature of Registered Agent)

6/25/07  
(Date)

If signing on behalf of an entity:

Arlene Fellerman, CPA  
(Typed or Printed Name)

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)

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TALLAHASSEE, FLORIDA