

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000104041

**Entity Name:** DKJS LLC

**Current Principal Place of Business:**

14851 STATE ROAD52  
SUITE 107  
NEW PORT RICHEY, FL 34669

**Current Mailing Address:**

14851 STATE ROAD52  
SUITE 107  
NEW PORT RICHEY, FL 34669 US

**FEI Number:** 45-3229306

**Certificate of Status Desired:** No

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

MUSCA, DANIEL GESQ.  
10950 SHELDON ROAD  
TAMPA, FL 33626 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	CRAWFORD, DAN C	Name	CRAWFORD, KAREN M
Address	14851 STATE ROAD52 SUITE 107	Address	14851 STATE ROAD52 SUITE 107
City-State-Zip:	NEW PORT RICHEY FL 34669	City-State-Zip:	NEW PORT RICHEY FL 34669

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** DANIEL C CRAWFORD

**MANAGING PARTNER**

**05/05/2020**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date