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.

MPT

SIGNATURE: DEMETREE J. C., JR.

Electronic Signature of Signing Authorized Person(s) Detail

Authorized Person(s) Detail ·

SIGNATURE: J. C. DEMETREE, JR.

Authorized Person(s) Detail :			
Title	MPT	Title	VPSAT
Name	DEMETREE, J. C. JR.	Name	DEMETREE, MARK C
Address	P.O. BOX 47050	Address	P.O. BOX 47050
City-State-Zip:	JACKSONVILLE FL 32247-7050	City-State-Zip:	JACKSONVILLE FL 32247-7050
Title	VPAS	Title	VPAS
Name	DEMETREE, CHRISTOPHER C	Name	DUNN, M HARRIS
Address	P.O. BOX 47050	Address	P.O. BOX 47050
City-State-Zip:	JACKSONVILLE FL 32247-7050	City-State-Zip:	JACKSONVILLE FL 32247-7050

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.

## Name and Address of Current Registered Agent:

DEMETREE, J. C. JR. 1551 ATLANTIC BLVD. SUITE 300 JACKSONVILLE, FL 32207 US

# 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000050203

Entity Name: DCL INVESTMENTS, LLC

### **Current Principal Place of Business:**

1551 ATLANTIC BLVD. SUITE 300 JACKSONVILLE, FL 32207

#### **Current Mailing Address:**

P.O. BOX 47050 JACKSONVILLE, FL 32247-7050 US

### FEI Number: 45-5034919

Electronic Signature of Registered Agent

Apr 22, 2016 Secretary of State CC5180857037

> 04/22/2016 Date

FILED

Certificate of Status Desired: No

04/22/2016 Date