

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000141634

Entity Name: DKN-EWN, LLC

Current Principal Place of Business:

3948 3RD ST. S. #163
JACKSONVILLE BEACH, FL 32250

Current Mailing Address:

3948 3RD ST. S. #163
JACKSONVILLE BEACH, FL 32250 US

FEI Number: 47-1820981

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MORGAN, JIM
3948 3RD ST. S. #163
JACKSONVILLE BEACH, FL 32250 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 AMBR
Name NEWELL, DANIEL
Address 601 BELL RD.
City-State-Zip: MONTGOMERY AL 36117

Title AMBR
Name NEWELL, EMILY
Address 601 BELL RD.
City-State-Zip: MONTGOMERY AL 36117

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 K. NEWELL

MANAGING MEMBER

04/26/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date