## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000199416 Entity Name: D'KADS II, LLC

**Current Principal Place of Business:** 

5023 24TH AVE SW NAPLES, FL 34116

**Current Mailing Address:** 

P.O. BOX 990339 NAPLES, FL 34116

FEI Number: 82-2916046 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAW OFFICE OF CONRAD WILLKOMM, P.A. 3201 TAMIAMI TRAIL N, 2ND FLOOR NAPLES, FL 34103 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

**FILED** Apr 10, 2018

**Secretary of State** 

CC2710133809

Authorized Person(s) Detail:

Title MGR

Title MGR

DUMAS, THERMEN D Name GARRICK-DUMAS, CHILENE A Name

P.O. BOX 990339 Address P.O. BOX 990339 Address City-State-Zip: NAPLES FL 34116 City-State-Zip: NAPLES FL 34116

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: THERMEN DUMAS

**MANAGER** 

04/10/2018