

# **2004 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L00000004156

Entity Name: DKM PROPERTIES, LLC

**FILED**  
**Oct 20, 2004**  
**Secretary of State**

**Current Principal Place of Business:**

1141 NORTON DR., APT. ONE  
QUEENS, NY 11691

**New Principal Place of Business:**

9SE BANYAN RD.  
APT A  
OCALA, FL 34472

**Current Mailing Address:**

POST OFFICE BOX 830965  
OCALA, FL 34483

**New Mailing Address:**

FEI Number: 22-3729194      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

RAMKELAWAN, DENNIS  
9 S.E. BANYAN RD  
OCALA, FL 34472      US

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

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

**MANAGING MEMBERS/MEMBERS:**

Title: MGR      ( ) Delete  
Name: RAMKELLAWAN, DENNIS  
Address: 1141 NORTON DR., APT. ONE  
City-St-Zip: QUEENS, NY 11691

**ADDITIONS/CHANGES:**

Title: MGR      (X) Change ( ) Addition  
Name: RAMKELLAWAN, DENNIS  
Address: 9SE BANAYAN RD.  
City-St-Zip: Ocala, FL 34472

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: DENNIS RAMKELLAWAN

MGR

10/20/2004

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date