(Requestor's Name) (Address) 80006075453	
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(Business Entity Name) (Document Number)	10/24/0501036020 **25.00
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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: DKM	ENTERPRISE	S, LLC
	(Name of Limited Liability Con	
Dear Sir or Madam:		
The enclosed Articles of Correction	and fee(s) are submitted for filing.	
Please return all correspondence con	cerning this matter to the following	g:
DONALD J (Name of	Person)	-
(Firm/Con	apany)	-
7110 NW 2	PT AUE	
6A INES UICC	E, FL 32606 Zip Code)	_
For further information concerning t	his matter, please call:	
SHARON BRAN (Name of Person)	UNAM at (35)	528-6558 Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	.	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the followi	_	_
\$25 Filing Fee S30 Filing Certificat	Fee & S55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy

CR2E062 (08/05)

ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted <u>within the required 30</u> <u>business days</u> to correct the <u>attached</u> articles of organization or application to transact business in Florida.

FIRST	The name of the limited liability company is:	·
SECO	ND: The articles of organization or the application to transact business	
(CH	ECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STA	TEMENT
X	Contains an incorrect statement. The incorrect statement, the reason the state incorrect, and the corrected statement are as follows:	ment is
	THE NAME OF THE LLC SHOULD BE	
	CORLECTED TO BE	
	DKM ENTERPRISES, LUC	
	<u>or</u>	
	Was defectively signed. The manner in which the document was defectively the appropriate correction are as follows:	signed and
		,
		-1 6
Dated:	OCTOBER 18 , 2005	SECULIA SECULI
	Signature of a member or authorized representative of a member	24 PH
	Typed or printed name of signee	3: 40 STATE STATE
	Filing Fee: \$25.00	

Certified Copy:

\$30.00 (optional)

CR2E062 (08/05) -

Electronic Articles of Organization For Florida Limited Liability Company

L05000094908 FILED 8:00 AM September 27, 2005 Sec. Of State mhodges

Article I

The name of the Limited Liability Company is: DKM, LLC

Article II

The street address of the principal office of the Limited Liability Company is: 7110 NW 28TH AVENUE GAINESVILLE, FL. US 32606

The mailing address of the Limited Liability Company is:

7110 NW 28TH AVENUE GAINESVILLE, FL. US 32606

Article III

The purpose for which this Limited Liability Company is organized is: ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

SHARON C BRANNAN CPA PA 161 N MAIN STREET WILLISTON, FL. 32696

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

· · · ·

Registered Agent Signature: SHARON C BRANNAN CPA

Article V

The name and address of managing members/managers are:

Title: MGRM DONALD J ALLEN 7110 NW 28TH AVENUE GAINESVILLE, FL. 32606 US

Signature of member or an authorized representative of a member Signature: DONALD J. ALLEN

L05000094908 FILED 8:00 AM September 27, 2005 Sec. Of State mhodges