

L060000032829

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

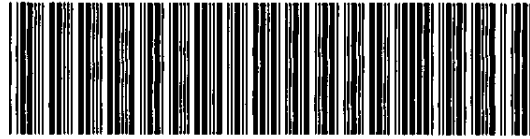
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

wrong form

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TALLAHASSEE, FLORIDA

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FEB 09 2016

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 5, 2016

DAVID MANN  
21301 S. TAMiami TRAIL, SUITE 320-171  
ESTERO, FL 33928

SUBJECT: D&K DIVERSIFIED CONSULTING, LLC  
Ref. Number: L06000032829

We have received your document for D&K DIVERSIFIED CONSULTING, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION - INC, but your entity is a LIMITED LIABILITY COMPANY - LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Mason  
Regulatory Specialist II

Letter Number: 416A00000200

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** D&K Diversified Consulting LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

David Mann  
Name of Person  
D&K Diversified Consulting LLC  
Firm/Company  
21301 S Tamiami Trail Ste 320-171  
Address  
Estero FL 33928  
City/State and Zip Code  
dmanna@dkconsulting.org  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Mann at ( 239 ) 560 0148 OR  
Name of Person Area Code Daytime Telephone Number  
920 639 0720

Enclosed is a check for the following amount:

- ☐ \$25.00 Filing Fee  
☒ \$30.00 Filing Fee & Certificate of Status  
☐ \$55.00 Filing Fee & Certified Copy  
(additional copy is enclosed)  
☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



**If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:**

**MGR = Manager**

**AMBR = Authorized Member**

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Amendment pertains to ownership of the LLC and is as follows:

David G Mann 9890 (Managing Member)

Kaitlyn Laurynz 2070 (silent managing member)

E. Effective date, if other than the date of filing: 01/01/2015 (no later than 12/31/2015) (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  
(b) The 90th day after the record is filed.

Dated

2/2/15



Signature of a member or authorized representative of a member

DAVID MANN

Typed or printed name of signer

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