

L13000078077

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

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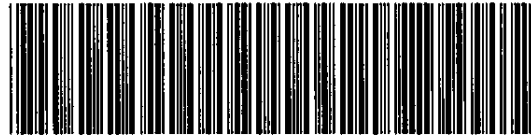
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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: D.A.N.I. Properties, 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:

Debra A. Northcutt

Name of Person

D.A.N.I. Properties, LLC

Firm/Company

1120 SW 45th Terrace

Address

Cape Coral, FL 33914

City/State and Zip Code

debbienorthcutt3@gmail.com

E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FL 32301

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For further information concerning this matter, please call:

Debra Northcutt

Name of Person

at 239 699-4264

Area Code & Daytime Telephone Number

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

MGR = Manager
MGRM = Managing Member

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