

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000035393

Entity Name: DKLZ, LLC

Current Principal Place of Business:

4743 N US HWY 441
LAKE CITY, FL 32055

Current Mailing Address:

PO BOX 2954
LAKE CITY, FL 32056 US

FEI Number: 41-2137423

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ZUCCOLA, LORI
LAKE CITY CAMPGROUND
PO BOX 2954
LAKE CITY, FL 32056 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

Authorized Person(s) Detail :

Title MGRM
Name ZUCCOLA, LORI A
Address PO BOX 2954
City-State-Zip: LAKE CITY FL 32056

Title MGRM
Name ZUCCOLA, KIMBERLY A
Address PO BOX 2954
City-State-Zip: LAKE CITY FL 32056

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: LORI ZUCCOLA

MANAGER

03/10/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date