

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000035352

**Entity Name:** DKD & ASSOCIATES, L.L.C.

**Current Principal Place of Business:**

1000 BRICKELL AVE,  
STE 102  
MIAMI, FL 33131

**Current Mailing Address:**

1000 BRICKELL AVE,  
STE 102  
MIAMI, FL 33131 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

MARRERO, JOSE C  
1200 BRICKELL AVENUE  
# 505  
MIAMI, FL 33131 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 DE MUNTER, DANIEL  
Address 1250 S. MIAMI AVENUE, # 1515  
City-State-Zip: MIAMI FL 33130

Title MGRM  
Name DE MUNTER, DIANA  
Address 1250 S. MIAMI AVENUE # 1515  
City-State-Zip: MIAMI FL 33130

Title MGRM  
Name DE MUNTER CAVAZZA, KRISTINA J.  
M  
Address 1250 S. MIAMI AVENUE # 1515  
City-State-Zip: MIAMI FL 33130

Title MGRM  
Name CAVAZZA DE MUNTER, DIANA  
Address 1250 S. MIAMI AVENUE # 1515  
City-State-Zip: MIAMI FL 33130

Title MGRM  
Name DE MUNTER MOONENS, DANIEL M. J.  
Address 1250 S. MIAMI AVENUE # 1515  
City-State-Zip: MIAMI FL 33130

*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:** DE MUNTER , DANIEL

**MGRM**

**04/23/2021**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date