



**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** DG GAINESVILLE, LLC  
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed Affidavit by Foreign Limited Liability Company to Change Manager(s) or Managing Member(s) and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LEONID CHERNOY  
Name of Person

ADELEN HOLDING, LLC  
Firm/Company

275 COLERIDGE STREET  
Address

BROOKLYN, NY 11235  
City/State and Zip Code

LCHERNOY@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LEONID CHERNOY at ( 917 ) 415-1122  
Name of Person Area Code and 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 following amount:**

\$25 Filing Fee

\$30 Filing Fee &  
Certificate of Status

\$55.00 Filing Fee &  
Certified Copy

\$60 Filing Fee,  
Certificate of Status &  
Certified Copy

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TALLAHASSEE, FLORIDA

**AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY  
TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: DG GAINESVILLE, LLC

2. This entity was formed under the laws of: WYOMING

3. This entity was authorized to transact business in Florida on 02/09/2011  
and its Florida document/registration number is M11000000671

4. The name and address of each manager or managing member is as follows:

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGRM

ADELEN HOLDING, LLC  
275 COLERIDGE STREET  
BROOKLYN, NY 11235

MGR

ADELLA CHERNOY  
275 COLERIDGE STREET  
BROOKLYN, NY 11235

MGR

LEONID CHERNOY  
275 COLERIDGE STREET  
BROOKLYN, NY 11235

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FILED

Required Signature: \_\_\_\_\_



Signature of Manager, Managing Member or Member

Filing Fee: \$25