2013 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 08, 2013
Secretary of State
CC2974235026

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Entity Name: DG DADE CITY FLORIDA, LLC

Current Principal Place of Business:

275 COLERIDGE STREET
BROOKLYN, NY 11235

Current Mailing Address:

275 COLERIDGE STREET
BROOKLYN, NY 11235

FEI Number: 27-4151685

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

3003-2410 LLC
1800C OCEAN DRIVE UNIT 3003
HALLANDALE BEACH, FL 33009 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	MANAGING MEMBER
Name	ADELEN HOLDING, LLC
Address	275 COLERIDGE STREET
City-State-Zip:	BROOKLYN NY 11235

Title	MANAGER
Name	CHERNOY, LEONID
Address	275 COLERIDGE STREET
City-State-Zip:	BROOKLYN NY 11235

Title	TRUSTEE
Name	CHERNOY, RINA
Address	275 COLERIDGE STREET
City-State-Zip:	BROOKLYN NY 11235

Title	TRUSTEE
Name	CHERNOY, LEONID
Address	275 COLERIDGE STREET
City-State-Zip:	BROOKLYN NY 11235

Title	MANAGER
Name	CHERNOY, ADELLA
Address	275 COLERIDGE STREET
City-State-Zip:	BROOKLYN NY 11235

Title	TRUSTEE
Name	CHERNOY, DAVID
Address	275 COLERIDGE STREET
City-State-Zip:	BROOKLYN NY 11235

Title	TRUSTEE
Name	CHERNOY, ADELLA
Address	275 COLERIDGE STREET
City-State-Zip:	BROOKLYN NY 11235

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LEONID CHERNOY MANAGER 01/08/2013

Electronic Signature of Signing Authorized Person(s) Detail — Date