

**A23000009761**  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : PETERSON & MYERS PA  
Account Number : I2008000078  
Phone : (863)683-6511  
Fax Number : (863)688-8099

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: green@wheelockst.com

2023 JAN - 9 AM 10:02

**FLORIDA/FOREIGN LP/LLLP  
DJG Family Limited Partnership, LLLP**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$1,000.00

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

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JAN 10 2023  
K. Brumbley

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COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: DJG Family Limited Partnership, LLLP  
Name of Florida Limited Partnership or Limited Liability Limited Partnership

The enclosed Certificate of Limited Partnership and fees are submitted for filing.

Please return all correspondence concerning this matter to:

David A. Miller  
Contact Person  
Peterson & Myers, P.A.  
Firm/Company  
225 East Lemon Street, Suite 300  
Address  
Lakeland, Florida 33801  
City, State and Zip Code

green@wheelockat.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David A. Miller at (863) 683-6511  
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- \$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee)
- \$1,008.75 Filing Fees and Certificate of Status
- \$1,052.50 Filing Fees and Certified Copy
- \$1,061.25 Filing Fees, Certified Copy, and Certificate of Status

STREET ADDRESS:  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

MAILING ADDRESS:  
Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

CR2E030 (6/17)

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CERTIFICATE OF LIMITED PARTNERSHIP  
FOR  
FLORIDA LIMITED PARTNERSHIP  
OR  
LIMITED LIABILITY LIMITED PARTNERSHIP


1. DJG Family Partnership, LLLP  
(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

2. 6755 Poley Creek Drive West  
(Street address of initial designated office)  
Lakeland, Florida 33811

3. Daniel B. Groen  
(Name of Registered Agent for Service of Process)

4. 6755 Poley Creek Drive West  
(Florida street address for Registered Agent)  
Lakeland, Florida 33811

5. *I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
Signature of Registered Agent

6. 6755 Poley Creek Drive West  
(Mailing address of initial designated office)  
Lakeland, Florida 33811

7. If limited partnership elects to be a limited liability limited partnership, check box .

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TAMPA, FLORIDA

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8. Name and business address of each general partner:

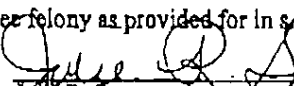
<u>Name:</u>	<u>Business Address:</u>
Daniel B. Green	6755 Poley Creek Drive West Lakeland, Florida 33811
Julle R. Green	6755 Poley Creek Drive West Lakeland, Florida 33811

9. Effective date, if other than the date of filing: \_\_\_\_\_  
*(Effective date cannot be prior to nor more than 90 days after the date the document is filed by the Florida Department of State.)*  
 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signed this 6<sup>th</sup> day of January, 2023

Signature of each general partner: I/We submit this document and affirm that the facts stated herein are true. I/We am/are aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in §817.155, F.S.

  
 Daniel B. Green

  
 Julle R. Green

Filing Fees: \$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)  
 Certified Copy (optional): \$52.50  
 Certificate of Status (optional): \$8.75

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