

#L04000076927

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP.

☐

WAIT

☐

MAIL

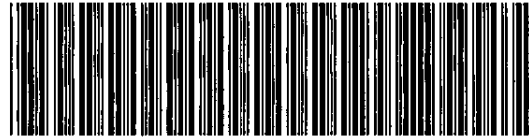
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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13 JAN -8 AM 11:41  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
EXAMINER  
JAN 10 2013



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 28, 2012

DJG AFFORDABLE HOMES LLC  
DAN J GILLIS SR.  
1111 MOTORCOACH DR.  
POLK CITY, FL 33868

SUBJECT: DJG AFFORDABLE HOMES, LLC.  
Ref. Number: L04000076927

We have received your document for DJG AFFORDABLE HOMES, LLC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document submitted is incomplete. The last page (signature page) is missing. Enclosed is the last page, for your convenience. Please sign and return along with the rest of the document and a copy of this letter to our office.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly  
Regulatory Specialist II

Letter Number: 712A00030538

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: DJG AFFORDABLE HOMES LLC**

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**DAN J. GILLIS Sr.**

Name of Person

**DJG AFFORDABLE HOMES LLC**

Firm/Company

**1111 MOTORCOACH Dr.**

Address

**POLK CITY, FL 33868**

City/State and Zip Code

**GPOPSGILLIS@BMAIL.COM**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**DAN J. GILLIS Sr.**

Name of Person

at ( **863** ) **255-0673**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS:**

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

**STREET/COURIER ADDRESS:**

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

FILED  
13 JAN -8 AM 11:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
ds.)

**(Name of the Limited Liability Company as it now appears on our records.)**  
**(A Florida Limited Liability Company)**

Page 1 of 3

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager  
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	KATHERINE M. PRIBBLE	3814 Rock Creek Drive	<input checked="" type="checkbox"/> Add
		Unit F	<input type="checkbox"/> Remove
		FT. COLLINS, CO 80528	
MGR	DAN J. GILLIS Jr.	4720 Park Brooke Trace	<input checked="" type="checkbox"/> Add
		Alpharetta, GA 30022	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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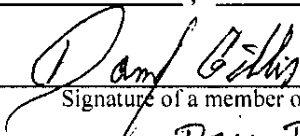
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Dated 1/7/2013



Signature of a member or authorized representative of a member

DAN J. BELLIS

Typed or printed name of signee

**Page 3 of 3**

**Filing Fee: \$25.00**