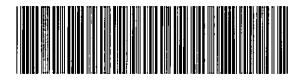
# MILOOOOOIS94

·							
(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

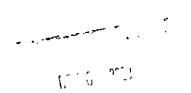
Office Use Only



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FILED
2020 NOV -6 AM 8: 34

2020 NOV -6



## Incorporating Services, Ltd.

1540 Glenway Drive Tallahässee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com



#### ORDER FORM

TO | Florida Department of State

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303 corphelp@dos.myflorida.com

850-245-6051

FROM Melissa Stops

mstops@incserv.com

850.656.7953

REQUEST\_DATE 11/5/2020

PRIORITY Routine

OUR REF.# (Order ID#) | 862735

ORDER ENTITY 1350 S DIXIE LLC

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	4	25	'n	C	DIV	16		. / [	١.					

1350 S DIXIE LLC (FL)

File the attached change of agent document

	*	•	-			-		· • ·	<b>~</b>
NOTES:				_		 _			
\$25 NN Authorized									

\$25.00 Authorized

Email address for annual report reminders: breynolds@nrinternational.com

## RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Thursday, November 5, 2020 Page 1 of 1

# STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. 1	Name of the limited liability company: 1350 S DIXIE LI	.C								
2. (a	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  2020 Ponce de Leon Blvd., Suite 1104	_	i	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  2020 Ponce de Leon Blvd, Suite 1104						
	Coral Gables, FL 33134		Coral Gables. FL 33134							
	02/25/2016		M16000001	596						
3. 5. (a	Date of filing/registration in Florida  Brent Reynolds	4.	Document number							
<i>J.</i> (a	Registered Agent and Registered Office shown on the records of 2020 Ponce de Leon Blvd.	- e:								
	Registered Office Address (MUST BE FLORIDA STREET) Suite 1104	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) Suite 1104								
	Coral Gables	33134		2020 NOV						
<b>(</b> b)	Incorporating Services, Ltd	- 6								
	1540 Glenway Drive		Es è U							
	NEW Registered Office Address:		34 34							
	Tallahassee, FL	32301		•						
chang agent was/w	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia- vere authorized by an affirmative vote of the members of ticles of organization or hecoperating agreement of the	register bility confither the finited	red office and ompany, it is nited liability	d the business office of the registered thereby confirmed that the change(s) y company or as otherwise provided in pany.						
Sign	ature of a member or authorized representative of a member			Printed or typed name of signee						
I here provis the ob- to men natifie	eby accept the appointment as registered agent and agressions of all statutes relative to the proper and complete pligations of my position as registered agent as provided rely reflect a change in the registered office address, I had in writing of this change.	ee to au perforn l for in vereby c	t in this capa tance of my a Chapter 605, confirm that t	ncity. I further agree to comply with the luties, and I am familiar with and accept , F.S. Or, if this document is being filed he limited liability company has been						
/ /	ure of Registered Agent									

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00