M160000002489

(Requestor's Name)				
(Address)				
(Address)				
- (C:+ (C		40		
(City/S	tate/Zip/Phone	#)		
PICK-UP	MAIT	MAIL		
(Busin	ess Entity Nam	e)		
(Document Number)				
•	ŕ			
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



700354829787

2020 NOV -6 AM 8: 55

Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

*:Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

incserv

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 251 S DIXIE LLC

PLEASE PERFORM THE FOLLOWING SERVICES:

251 S DIXIE LLC (FL)

File the attached change of agent document

NOTES:

\$25.00 Authorized

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

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

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.

l. Na	me of the limited liability company: 251 S DIXIE LL	С			
) (a)		(b)		
. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	 \	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	2020 Ponce de Leon Blvd Suite 1104		2020 Por	nce de Leon Blvdf, Suite 1104	
	Coral Gables, FL 33134		Coral Ga	bles, FL 33134	
	07/08/2016		M1600000)5489	
3.	Date of filing/registration in Florida	 4.		Document number	
5. (a)	Brent Reynolds				
i. (a)	Registered Agent and Registered Office shown on the records of	the Floric	la Dept. of St	<u></u>	
	2020 Ponce de Leon Blvd.				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u>(S)</u>		
	Suite 1104			2020	
	Coral Gables , Fl	33134	• ,	FIL 2020 NOV -6	
(b)	Incorporating Services, Ltd.	•			
(-,	Enter name of NEW Registered Agent and/or NEW Registered	d Office a	ddress:	***	
	1540 Glenway Drive			8: 55 Sing	
	NEW Registered Office Address:			_	
	Tallahassee	22201			
	Tananassee , FI	32301		<u> </u>	
:hange igent v vas/we	imited liability company is not organized under the later or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liter authorized by an affirmative vote of the members cless of organization or the operating agreement of the	e register ability co of the line limited	ed office a ompany, it nited liabil	nd the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in mpany.	
Signat	ture of a member or authorized representative of a member			Printed or typed name of signee	
provisi he obl p mere	by accept the appointment as registered agent and agons of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I imminished the change.	ree to ac perforn d for in hereby c	t in this cap lance of my Chapter 60 confirm tha	pacity. I further agree to comply with the eduties, and I am familiar with and accep 15, F.S. Or, if this document is being filed the limited liability company has been	
/ 4 Signatur	c of Registered Agent				