

L040000031375

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

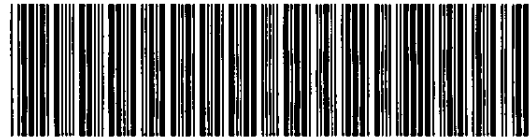
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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N. Gungah NOV - 3 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **Dixie Partners 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:

Abe Haruvi

Name of Person

Firm/Company

P.O. Box 1088

Address

Palm Beach, FL 33480

City/State and Zip Code

aharuvi@yahoo.com

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

For further information concerning this matter, please call:

Abe Haruvi

Name of Person

at ()

Area Code

917 853 5938

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 21, 2014

ABE HARUVI
PO BOX 1088
PALM BEACH, FL 33480

SUBJECT: DIXIE PARTNERS, LLC
Ref. Number: L04000031375

We have received your document for DIXIE PARTNERS, 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):

A post office box is not an acceptable address for the registered agent.

The effective date must be specific and cannot be prior to the date of filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan
Regulatory Specialist II

Letter Number: 014A00022514

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

2014 NOV -3 PM 3:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dixie Partners LLC

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

The Articles of Organization for this Limited Liability Company were filed on april 23, 2004 and assigned
Florida document number L04000031375.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

980 North Lake Way

Palm Beach, FI 33480

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. Box 1088

Palm Beach, FI 33480

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Abe Haruvi

New Registered Office Address:

980 NORTH LAKE WAY

Enter Florida street address

Palm Beach

City

Florida 33480

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Abe Haruvi
If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager

AMBR = Authorized Member

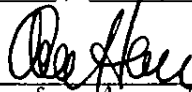
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGr	Abe Haruvi	980 N. Lake Way	<input checked="" type="checkbox"/> Add
		Palm Beach, Fl 33480	<input type="checkbox"/> Remove
MGr	Susan Maynor	809 N. Dixie Highway	<input type="checkbox"/> Add
		2nd Floor	<input checked="" type="checkbox"/> Remove
		West Palm Beach, FL 334	
MGr	Mark Maynor	809 N. Dixie Highway	<input type="checkbox"/> Add
		2nd Floor	<input checked="" type="checkbox"/> Remove
		West Palm Beach, Fl 334	
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated October 14, 2014.



Signature of a member or authorized representative of a member

ABE HARUVI

Typed or printed name of signee

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Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA