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OFFICE OF

## TRINKLE, REDMAN, SWANSON, COTON DAVIS & SMITH, P.A.

ATTORNEYS AT LAW 121 NORTH COLLINS STREET P.O. BOX TT PLANT CITY, FLORIDA 33564-9040

JOHN R. TRINKLE (1901-1969) JAMES L. REDMAN (1932-2006)

DANIEL M. COTON JAMES C. DAVIS, II KEITH C. SMITH CONRAD SWANSON ROBERT S. TRINKLE

Of Counsel: JOHN L. DICKS

September 19, 2007

Division of Corporations Amendment Section P. O. Box 6327 Tallahassee, Florida 32314

Re:

Dixie Fire Protection, LLC

Gentlemen:

On behalf of the above corporation, enclosed is Statement of Change of Registered Office or Registered Agent or Both for Corporation signed by Registered Agent. Also enclosed is Cover Letter, with our firm's check for \$35.00 payable to the Department of State which represents the filing fee.

Thank you for your assistance.

Flarene Br

Very truly yours,

Florene Gray

Asst. to Daniel M. Coton, Esquire

**Enclosures** 

TELEPHONE (813) 752-6133 TELECOPIER (813) 754-8957 TITLE FAX (813) 719-2240

Writer's e-mail: dcoton@trinkle-law.com

OT OCT -3 PM 12: 09



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 24, 2007

RECEIVED

SEP \$7 2007

FLORENE GRAY TRINKLE, REDMAN, SWANSON, COTON, ET AL 121 NORTH COLLINS STREET PLANT CITY, FL 33564-9040

SUBJECT: DIXIE FIRE PROTECTION, LLC Ref. Number: L06000068451

We have received your document for DIXIE FIRE PROTECTION, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6043.

Letter Number: 307A00055902

Joey Bryan Document Specialist EIVISION OF CORPORATIONS 07 OCT -3 PM 12: 09 OFFICE OF

### TRINKLE, REDMAN, SWANSON, COTON DAVIS & SMITH, P.A.

ATTORNEYS AT LAW 121 NORTH COLLINS STREET P.O. BOX TT PLANT CITY, FLORIDA 33564-9040

TELEPHONE (813) 752-6133

TELECOPIER (813) 754-8957

TITLE FAX (813) 719-2240

Writer's e-mail: dcoton@trinkle-law.com

JOHN R. TRINKLE (1901-1969) JAMES L. REDMAN (1932-2006)

DANIEL M. COTON JAMES C. DAVIS, II KEITH C. SMITH CONRAD SWANSON ROBERT S. TRINKLE

Of Counsel: JOHN L. DICKS

October 1, 2007

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

Re:

Dixie Fire Protection, LLC

#### Gentlemen:

On behalf of the above LLC, enclosed is Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company. Also enclosed is Cover Letter; however, our check for \$35.00 was enclosed in our previous correspondence, which represents an overpayment of \$10.00 on the filing fee.

A self-addressed stamped envelope is also enclosed for returning the confirmation and refund of \$10.00 payable to our office.

Thank you for your assistance.

Flarene Bray

Sincerely yours,

Florene Gray

Asst. to Daniel M. Coton, Esquire

**Enclosures** 

### **COVER LETTER**

TO: Registration Section Division of Corporations						
SUBJECT: DIXIE FIRE PROTECTION	ON, LIC					
	Limited Liability Company)					
Dear Sir or Madam:	•					
The enclosed Registered Agent/Registered (	Office Change and fee(s) are submitted fo	or filing.				
	• ,,	og.				
Please return all correspondence concerning	this matter to the following:					
FLOYD T. WIGGINS	•	ø				
(Name of Person)		OF VIS				
++		OT OCT -3 PM 12: 09				
DIXIE FIRE PROTECTION, LLC		OF TAR				
(Firm/Company)		3 F				
		OF SKYTIONS PM 12: 09				
4310 Kipling Avenue		2: 0				
(Address)		98.0 SR.0				
Plant City, Florida 33566						
(City/State and Zip Code)	<del></del>					
For further information concerning this mat	ter, please call:					
Flowd T. Wiggins	at ( <u>813</u> ) <u>927-5653</u>					
(Name of Person)	(Area Code & Daytime Te	elephone Number)				
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314					
Enclosed is a check for the following	ng amount:					
\$25 Filing Fee	\$25 Filing Fee \$\times \text{S55 Filing Fee & Certified Copy}\$					

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

Pursuant to the provisions of sections 608.416 or 608.508, 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. The name of the limit	ed liability company is:	DIXIE	FIRE	PROT	ECI	OLT	LLC	<del>.</del>
2. The mailing address of	of the limited liability cor	npany is:	2293	US	92	E,	Plant	City,FL
33563	<u> </u>	<u>^</u>						
7/10/06 - Amendment 6/7/07 IO6000068451 3. Date of filing/registration in Florida 4. Document number								
5. The name of the regist Florida Department of	ered agent and the regist State:	ered office	address	as sho	o aw	on the	e records	of the
•	<u>Charles W. White</u>	Nama	<u>, , , , , , , , , , , , , , , , , , , </u>				t	
	6604 Madeira Avent	Name 1e	~~					
	Lakeland, Florida	Address 33811						
	•	state and Z	•				07	<u>≅</u> ≤ <i>a.</i>
6. The name and address	of the new registered age	ent and/or	office:				0CT	SION
	Floyd T. Wiggins						- u	97 PAR
- <del>-</del>	4310 Kipling Aven	ame Je					PM 12: 09	ED Y OF S
	Florida street address	(P.O. Box	NOT acc	eptab	le)			STAT
	Plant City	FL 3356	66					SHO
	City, St	ate and Zip	)				_	
confirmed that after the cand the business office of liability company, it is he of the members of the li or the operating agreement.	mpany is not organized us change or changes are many of the registered agent will ereby confirmed that the mited liability company cont of the limited liability or liabili	ide, the Flo I be identic change(s) v or as otherv company.	rida stree al. Or, i was/were	et add of the cautho	ress ( case ( orize	of the of a l d by	e registere Florida li an affirm	ed office mited ative vote
Floyd T. Wiggins		<u></u>	<del>}.</del>					
(Printed or typed name of signed			4				, Y.A. II	
I hereby accept the appo comply with the provisio and I am familiar with a Chapter 608, F.S. Or, if address, I hereby confire	pintment as registered ag ns of all statutes relative nd accept the obligations this document is being fi n that the limited liability	ent and ag to the prop of my posi led to merc company	ree to actorized and continuous reflection as reflections been	in thi omple egister la che notifi	is cap red a ange cd in	pacit erfori igent in th writ	y. I jurth mance of as provid te register ling of thi	er agree to ny duties, led for in red office s change.
(Signature of Registered Agent)	Floyd T. Wiggins	·· <del>·</del>						
<b>D</b> ivisi	on of Corporations, P.C FILING	). Box 632' FEE: \$25		assee	, FL	323	14	

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