# 13000111105

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J. SAULSBERRY

a 2013

### **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: Dixon & Zeus, 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:

## Herman Garcia

Name of Person

# The Spa on the Grove

Firm/Company

1301 sw 26 ave

Address

## Boynton Beach FI, 33426

City/State and Zip Code

## thespaonthegrove@gmail.com

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

For further information concerning this matter, please call:

# Herman Garcia

Name of Person

<sub>.,,</sub>954,**303-646**1

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability C (A Florida Liability	Company as it now appears on our mited Liability Company)	records.)	<del></del>
The Articles of Organization for this Limited Liability Con Florida document number <u>L13000111105</u>	mpany were filed on Aug 06,2	2013	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	ed liability company here:		
The new name must be distinguishable and end with the words "L.L.C."	s "Limited Liability Company," the	designation "LLC	or the abbreviation
Enter new principal offices address, if applicable:			2813
(Principal office address MUST BE A STREET ADDRE	ESS)	•	E L
			<u> </u>
Enter new mailing address, if applicable:			R
(Mailing address MAY BE A POST OFFICE BOX)		Š.	<u>ن</u>
	<del></del>		
B. If amending the registered agent and/or registe registered agent and/or the new registered office addresses		ords, <u>enter the</u>	name of the nev
Name of New Registered Agent:			
New Registered Office Address:	Entar Flori	ida street addres	
	Enter Flori		J
	City	, Florida	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 608, 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.

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>	Name	Address	Type of Action
MGRM	Herman Garcia	1301 sw 26 ave	Add
		Boynton Beach FL 3342	Remove
MGR	Herman Garcia	1301 sw 26 ave	
		Boynton Beach FI,3342	6 Remove
			Add
			Remove
			Add
	- AND	7	Add Remove
<del></del>			_ Add _ Remove

- ·	on Herman Garcia from MGR to MGRM
Only changing status	on remain dated from war to war tiv
***************************************	
Sept 12	2013
eu	_,
Cignoture	. Company to a contract of the
Herman Garcia	of a member or authorized representative of a member
Herman Garcia	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2013 SEP 16 AM 9: 52