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(Red	questor's Name)			
(Add	dress)			
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(City	y/State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				





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SECRETARY OF STATE
AND ANALYSIS FLORIDA

S. WARREN 0CT 2 0 2017



October 11, 2017

TESSA HALL 1500 SANDAL LANE, APT. 1511 PANAMA CITY BEACH, FL 32413

SUBJECT: DIXIE CHIC, LLC Ref. Number: L14000155182

We have received your document for DIXIE CHIC, 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):

The registered agent must sign accepting the designation.

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.

Letter Number: 017A00020487

Stacey M Warren Regulatory Specialist II

www.sunbiz.org

COVER LETTER

Division of Corporations			
SUBJECT: DIXIE Chic, LLC			
Name of Limited Liability Company			
Dear Sir or Madam:	•		
The enclosed Registered Agent/Registered Office Cha	ange and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter	er to the following:		
Tessa Hall Name of Person			
Dixie Chic, LLC Firm/Company	. <u></u>		
1500 Sandal Ln. Apt. 1511 Address	<u> </u>		
Panama City Beach FL 3. City/State and Zip Code	2413		
E-mail address: (to be used for future annual re	port notification)		
For further information concerning this matter, please	e call:		
at (
Name of Person	Area Code & Daytime Telephone 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 amount:			
\$25 Filing Fce	☐ \$55 Filing Fee & Certified Copy		

TO:

Registration Section



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. Na	me of the limited liability company: DIXIE Chic, L	LC
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (b) SON	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Apt. 1511	
	Panama City Beach, FL 32413	
3.	Date of filing/registration in Florida 4.	Document number
5. (a)	Legal Zoom, Inc. j United States Cor Registered Agent and Registered Office shown on the records of the Florida Dept. of Sta	oporation Agents, Inc.
	Registered Office Address (MOST BE FLORIDA STREET ADDRESS)	-
	Suite A	- 7g 3
	Tampa , FL 33612	OC I
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:	19 PA
	17888 67th Court North NEW Registered Office Address:	PH 1: 45 RY OF STATE SEE, FLORIDA
	2711	_
	Loxahatchee , Fl 33470	~
the cha agent v was/we	imited liability company is not organized under the laws of the State of Finge or changes are made, the Florida street address of the registered officivill be identical. Or, in the case of a Florida limited liability company, it are authorized by an affirmative vote of the members of the limited liability costs of organization or the operating agreement of the limited liability costs.	e and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
<u> </u>	TES ure of a member or authorized representative of a member	
I herei provisi the obl to mere	by accept the appointment as registered agent and agree to act in this cap ons of all statutes relative to the proper and complete performance of my igations of my position as registered agent as provided for in Chapter 60 ly reflect a change in the registered office address, I hereby confirm that I in writing of this change.	Printed or typed name of signee bacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been