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(Requestor's Name)
(Address)
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,
(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
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## **COVER LETTER**

SUBJECT: DIX REALTORS LLC  No  The enclosed Articles of Amendment and feets  Please return all correspondence concerning the	me of Limited Liability Company
Na The enclosed Articles of Amendment and fee(s	me of Limited Liability Company
	•
Please return all correspondence concerning th	
	is matter to the following:
TYLER BENZEI	
	Name of Person
DIX REALTORS	GLLC
	Firm/Company
103 COMMERCI	E STREET, SUITE 140
	Address
LAKE MARY, F	LORIDA 32746
	City/State and Zip Code
TYLER.BENZELO F-mail	@YAHOO.COM address: (to be used for future annual report notification)
For further information concerning this matter,	
TYLER BENZEL	352 267-8496
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
■ \$25.00 Filing Fee □ \$30.00 Filing Fe Certificate of \$	

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

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New Registered Agent's Signature, it 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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
VP	BARBARA NILES	· · · · · · · · · · · · · · · · · · ·	
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		<u> </u>	☐ Change
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			Remove
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Filing Fee: \$25.00