

L19000048820

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

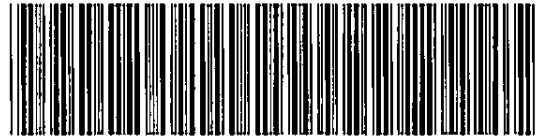
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AND
FILED
2019 APR -4 PM 4:08
CLERK OF STATE
TALLAHASSEE, FL

T.G. 4/4/19

FAX

To: ATTN : TACARRI

Company: Dept of state

Fax: 850-245-6030

Phone:

From: Terri T Moody for Dixie Title Services LLC

Fax: 352.541.6072

Phone: + 1 352-541-6053

E-mail: Debbie.Dembo@amerisbank.com

NOTES:

Tacarri, Terri Moody had spoken with you and needed to send the signature page in to be verified. Please find attached the sig page needed to complete the authorized members section of the LLC. Please call me at 352-494-9862 if I need anything else. I attached the full Articles of Amendment to the Articles of Organization. Thanks Terri

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03:13:20 PM 4/4/2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DIXIE TITLE SERVICES LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

TERRI T MOODY
Name of Person

DIXIE TITLE SERVICES LLC
Firm/Company

179 NE 351 HWY SUITE B
Address

CROSS CITY FL 32628
City/State and Zip Code

territmoody@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TERRI MOODY at (352) 494 9862
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 Fee

☐ \$55 Filing Fee & Certified Copy

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2019 APR -4 PM 4:08
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

DIXIE TITLE SERVICE 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 2-19-2019 and assigned Florida document number L19000048820

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 contain 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)

179 NE 351 Hwy Suite B
CROSS CITY FL 32628

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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

Name of New Registered Agent:

TERRI T MOODY

New Registered Office Address:

179 NE 351 Hwy Suite B

Enter Florida street address

CROSS CITY

City

Florida

32628

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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person 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	Dewey H. Hatcher, Jr.	738 NE 351 Hwy	<input checked="" type="checkbox"/> Add
		Cross City, FL 32628	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Terri T. Moody	① 179 NE 351 Hwy, Suite B	<input checked="" type="checkbox"/> Add
		Cross City, FL 32628	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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FILED
2019 APR 14 PM 4:08
CLERK OF DISTRICT COURT
JANUARY 1, 1900
TALLAHASSEE, FL 32301

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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SECRETARY
FALCONER

4/4/2019

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

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated April 4, 2019

Signature of a member or authorized representative of a member

Terri T. Moody

Typed or printed name of signee