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(((H19000230324 3)))



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : MACMILLAN & STANLEY, PLLC

Account Number : I20170000007

: (561)276-6363 Phone

Fax Number

: (561)276-8881

Enter the email address for this business entity to be used for futur annual report mailings. Enter only one email address please.

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COVER LETTER

	egistration Se ivision of Cor				
eim meer		LDINGS 17 LLC			
SUBJECT	·	Name of Lim	ited Liability Company		
The enclos	ed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please retu	m all correspo	ondence concerning this matter	to the following:		
		Thomas M. Stanley, Esq.			
			Name of Person		
		MacMillan & Stanley, PLI	.c		
			Firm/Company	 	
		29 NE 4th Avenue			
			Address	<u>.</u>	
		Delray Beach, FL 33483			
•			City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·	
		tom@macmillanstanley.com			
	•	E-mail address; (to be used for future annual r	eport notification	n)
For further	information c	oucerning this matter, please or	all:		
Melanie D	ay		56! 276	-6363	
	Name o	of Person	Area Code	Daytime Tele	phone Number
Enclosed i	s a check for t	he following amount:	,		
\$25.00) Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is each		Certificate of Status & Certified Copy (additional copy is enclosed)
	Regist	ING ADDRESS:	Registrati	COURIER A	
	P.O. B	on of Corporations ox 6327	Clifton Br		
	Tallah	assee, FL 32314	2661 Exe	cutive Center	Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H19000230324 3

DIXIE HOLDINGS 17 LLC		
(Name of the Limited Liability Con	pany as it now appears on our read Liability Company)	ecords.)
he Articles of Organization for this Limited Liability Compa lorida document number L19000168840	ny were filed on 06/27/2019	and assigned 9
his amendment is submitted to amend the following:		
If amending name, enter the new name of the limited b	ability company bere:	
he new name must be distinguishable and contain the words "Limited L	iability Company," the designation	"LLC" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:	3100 NW Boca Raton BI	
Principal office address MUST BE A STREET ADDRESS	Boca Raton, FL 33431	
un an te altabla	3100 NW Boca Raton B	lvd., Suite 404
Internal mailing address it applicable:		
Enter new mailing address, if applicable:	Boca Raton, FL 33431	·
Mailing address MAY BE A POST OFFICE BOX)		ecords, enter the name of the ne
	d office address on our ro here:	ecords, <u>enter the name of the ne</u>
Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registere registered agent and/or the new registered office address Name of New Registered Agent: William W	d office address on our rehere: ietsma Boca Raton Blvd., Suite 404	
Mailing address MAY BE A POST OFFICE BOX B. If amending the registered agent and/or registere registered agent and/or the new registered office address Name of New Registered Agent: William W	d office address on our re here: ietsma	ı address
Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registere registered agent and/or the new registered office address Name of New Registered Agent: William W	d office address on our rehere: ietsma Boca Raton Bivd., Suite 404 Enter Florida stree	ı address Florida ³³⁴³ 1
B. If amending the registered agent and/or registere registered agent and/or the new registered office address Name of New Registered Agent: New Registered Office Address: 3100 NW	d office address on our rehere: ietsma Boca Raton Bivd., Suite 404 Enter Florida stree	ı address
B. If amending the registered agent and/or registere registered agent and/or the new registered office address Name of New Registered Agent: New Registered Office Address: 3100 NW	d office address on our rehere: lietsma Boca Raton Bivd., Suite 404 Enter Florida stree Cuy	, Florida 33431 Zip Code

If amending Authorized Person(s) authorized to man	age, enter the title, name, and address of each person being added
or removed from our records:	
Of 1 of 10 of 11 o	H19000230324 3
	1110002303213

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Thomas M. Stanley	29 NE 4th Avenue Delray Beach, FL 33483	
			■ Remove
			□ Change
MOR	William Wietsma	3100 NW Boca Raton Blvd., Suite 404, Boca Raton, Ft. 33431	B Add
			□ Remove
-			2 Change
			AHd ←
			Remove U
			Charlee
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			Remove
			☐ Change
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If the date inserted in this block does no iment's effective date on the Department of	date, but not an effective time, at	
8/1/2010	2019	
ed 3/1/2017		
Signature	a member or authorized representative of a member	्व -
Signature o	B 7544 Typed or printed name of signee	oci

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