

L210000068349

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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2021 JUL -2 AM 8:39

CLERK OF COURT

Amend
Niche chg

JUL 02 2021

I ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Dixon and Washington Memorial and More Mortuary 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:

Malcolm Dixon
Name of Person

Dixon and Washington Memorial and More Mortuary LLC
Firm/Company

8593 S CR 231
Address

Lake Butler, FL 32054 Un
City/State and Zip Code

malcolmdixon13@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Malcolm Dixon at (352) 214-1629
Name of Person 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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Albritton, Irene

From: malcolm dixon <malcolmdixon13@gmail.com>
Sent: Friday, July 2, 2021 9:17 AM
To: Albritton, Irene
Subject: Re: Letter

EMAIL RECEIVED FROM EXTERNAL SOURCE

Hello. I am the owner of Dixon Mortuary and Cremation Service, Inc.. I am changing the name of my current LLC which is **DIXON & WASHINGTON MEMORIAL & MORE MORTUARY LLC** to Dixon Mortuary and Cremation Service, LLC

Malcolm Dixon
(352)214-1629

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

DIXON & WASHINGTON MEMORIAL & MORE MORTUARY LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2021 JUL -2 AM 8:39

The Articles of Organization for this Limited Liability Company were filed on 02/18/2021 and assigned Florida document number L21000068349.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Dixon Mortuary and Cremation Service, LLC.

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

8593 S CR 231

Lake Butler, FL 32054 UN

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

PO. Box 2435

Alachua, FL 32615

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

Name of New Registered Agent:

Malcolm V. Dixon

New Registered Office Address:

1514 NW 134th Ter

Enter Florida street address

Alachua

City

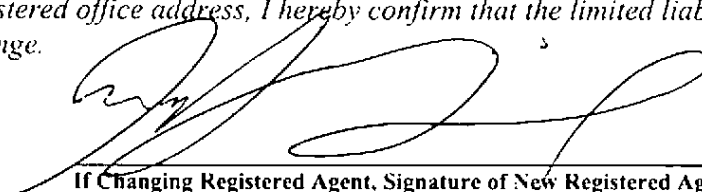
Florida

32615

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>
AMBR	Malcolm U. Dixon	15114 NW 134 th fer Alachua, FL 32615	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
CEO	Raymond Washington	8593 S Cr 231 Lake Butler, FL 32054	<input type="checkbox"/> Add
			<input checked="" 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
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(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)

Dated 6-23-2021, _____

Signature of a member or authorized representative of _____

Signature of a member or authorized representative of a member

Harold Dixon
Typed or printed name

Typed or printed name of signee