

121 000417800

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

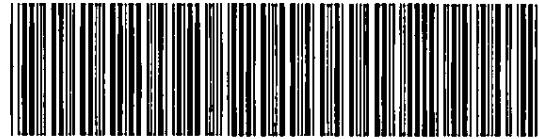
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03/21/22--01032--003 \*\*52.50

2022 MAR -2 AM 7:50

8/13/2022

## COVER LETTER

TO: Registration Section  
Division of Corporations

RECEIVED

SUBJECT: Dixons Elite Transportation  
Name of Limited Liability Company

2022 JUN 10 AM 8:08

SENT  
TALLAHASSEE, FL

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LaMar Omega Dixon

Name of Person

Dixons Elite Transportation

Firm/Company

9413 Sibbald Road

Address

Jacksonville, Florida 32208

City/State and Zip Code

lodixon60@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LaMar O. Dixon

Name of Person

at ( 904 )

Area Code

210-3755

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

2022 AUG -2 AM 11:30

June 14, 2022

LAMAR OMEGA DIXON  
9413 SIBBALD ROAD  
JACKSONVILLE, FL 32208

SUBJECT: DIXONS ELITE TRANSPORTATION LLC  
Ref. Number: L21000417800

We have received your document for DIXONS ELITE TRANSPORTATION LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The document must be signed by a member or an authorized representative of a member.

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) 245-6050.

Claretha Golden  
Regulatory Specialist II

Letter Number: 122A00013322



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 1, 2022

LAMAR OMEGA DIXON  
9413 SIBBALD ROAD  
JACKSONVILLE, FL 32208

SUBJECT: DIXONS ELITE TRANSPORTATION LLC  
Ref. Number: L21000417800

We have received your document for DIXONS ELITE TRANSPORTATION LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

The current name of the entity is as referenced above. Please correct your document accordingly.

The titles you have listed for the individuals or business entities which will manage the limited liability company are not acceptable. We cannot accept the terms: partner, officer, owner or member. You must insert the letters "MGRM" for each individual or business entity that is a member and will serve in a managerial capacity. If the individual or business entity is not a member, but will serve in a managerial capacity, you must insert the letters "MGR." We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

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) 245-6050.

Claretha Golden  
Regulatory Specialist II

Letter Number: 622A00007675