

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL				
OMB Number:	3235-0104			
Estimated average	e burden			
nours per respons	e 0.5			

### INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Fillit of Type Responses)								
Name and Address of Reporting Person *     Nix Jerry	2. Date of Event Requir Statement (Month/Day/ 10/27/2020				Ssuer Name and Ticker or Trading Symbol DLLINS INC [ROL]			
(Last) (First) (Middle) 2999 WILDWOOD PARKWAY				4. Relationship of Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)	
(Street) ATLANTA, GA 30339			(Check a  _X_Director  Officer (give title below)		all applicable) le = 10% Owner Other (specification)	cify Applicable X Form	dual or Joint/Group Filing(Check Line) filed by One Reporting Person filed by More than One Reporting Person	
(City) (State) (Zip)		Table I - Non-Derivative Securities Beneficially Owned						
1.Title of Security (Instr. 4)	str. 4)		Beneficially Owned (Instr. 4) (			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stock, \$1 Par Value		0	0		D			
Reminder: Report on a separate line for each class  Persons who respor unless the form disp	nd to the col plays a curre	llection o	of inform d OMB o	ation contained in t		·		
1. Title of Derivative Security 2. Date Exercisable and Expiration Date (Month/Day/Year)		isable n Date	3. Title and Amount of Securities Underlying Derivativ Security (Instr. 4)		4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security: Direct	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
	Date Exercisable D	Expiration Date	Title	nount or Number of ares	Security	(D) or Indirect (I) (Instr. 5)		
Reporting Owners								

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Nix Jerry 2999 WILDWOOD PARKWAY ATLANTA, GA 30339	X				

# Signatures

/s/ Jerry W. Nix	10/28/2020
**Signature of Reporting Person	Date

## **Explanation of Responses:**

- If the form is filed by more than one reporting person, see Instruction 5(b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, See Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.