05000028700

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Dusiness Entity Nome)
(Business Entity Name)
(Document Number)
(Dodament Namber)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
special instructions to runing officer.
4/22 name ch
(1)5-28700





700051065407

04/22/05--01019--004 **30.00

MJH

5 MFR 22 FF 2: 19

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: Deidre PARKER REALTOR, UC (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:
Deidre Parker (Name of Person)
(
(Firm/Company)
_
_ 3150 Winding Pine TR.
(Address)
For further information concerning this matter, please call:
De Idre Parker at (407) 617-0357 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Ferson) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount: \$\frac{1}{2}\$ \$25.00 \text{ Filing Fee} \\ \$30.00 \text{ Filing Fee} \\ \$\frac{1}{2}\$ \$55.00 \text{ Filing Fee} \\ \$\frac{1}{2}\$ \$60.00 \text{ Filing Fee}, \\ \$\frac{1}{2}\$ \$\frac
(additional copy is enclosed) Certified Copy (additional copy is enclosed)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Grand Street Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	DEIDRE PARKER REALTOR, LLC		_	
	(Present Name) (A Florida Limited Liability Company)			
FIRST:	The Articles of Organization were filed on $3/23/05$ and assigned document number $L0500028700$.			
SECOND:	The following amendment(s) to the Articles of Organization was/were adopted liability company:		mited	
	NAME Change to: DEIDRE PARKER, L	IC.		
Dated	Oril 20, 2005. Audia Parkar Signature of a member or authorized representative of a member		05 APR 22 PH 2: 19	The state of the s
	Deidre Parker			
	Typed or printed name of signee		•	

Filing Fee: \$25.00