

L080000040497

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

(Business Entity Name)

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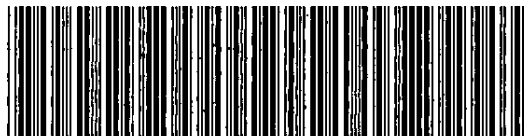
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G. MCLEOD

JUN 17 2008

EXAMINER



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06/16/08--01030--010 **30.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
08 JUN 16 PM 3:32

6/12/08

To Whom It May Concern:

This is to make the
Change from Chris Parker
as being Agent to
Georgia Hayford. Also
make Georgia Hayford
as manager & Chris
Parker as managing
member. New Address
has be Submitted also
for Georgia Hayford

Thank You
Chris Parker
352-536-3948

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Parkers Outdoor Services L.L.C.
(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:

Georgia Tipton Hayford
(Name of Person)
Parkers Outdoor Services LLC
(Firm/Company)
4218 Worthington Place
(Address)
Mascotte, FL 34753
(City/State and Zip Code)

For further information concerning this matter, please call:

Georgia Hayford at (352) 557-1999
(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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
08 JUN 16 PM 3:32

Parker's Outdoor Services L.L.C.
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company).

The Articles of Organization for this Limited Liability Company were filed on April 22, 2008 and assigned
Florida document number L0800004649.7

This amendment is submitted to amend the following:

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

N/A

The new name must be distinguishable and end with 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)

N/A

N/A

N/A

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

N/A

N/A

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:

Georgia T. Hayford

New Registered Office Address:

4218 Worthington Place

(Enter Florida street address)

Mascotte

(City)

Florida

34753

(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 608, 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.

Georgia T. Hayford
(If Changing Registered Agent, Signature of New Registered Agent)

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

| Title | Name | Address | Type of Action |
|-------|-------------------|---|---|
| MGR | Georgia T Hayford | 4218 Worthington Pl Mascotte, FL 34753 | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| MGRM | Christ Parker | 4218 Worthington Pl Mascotte, FL 34753 | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated June 12, 2008

Chris M Parker
Signature of a member or authorized representative of a member
Chris M Parker
Typed or printed name of signee