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COVER LETTER

TO:

FO: Registration Se Division of Cor		4	~
SUBJECT:	· Zeisier	and Parver ILL	
	Name of Lim	ited Liability Company	
The enclosed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	K	Cyland D. Zeis	ner
	2e	EISLEY and Park	er, LIC
	950	SE LITH AVE	
	Po	Mpano Beac	in FL 33000
		City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code City/State and Zip Code	
For further information co	oncerning this matter, please c	all:	
Kayla Name of	ZeiSle ($\frac{1}{\text{Area Code}} \text{ at } (\frac{50}{\text{Daytime}})$	Telephone Number
Enclosed is a check for th	e following amount:		
S25.00 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 S	Section	Street Address: Registration Sec	
Division of C P.O. Box 632	7	Division of Corp The Centre of To	allahassee
Tallahassee, F	FL 32314	2415 N. Monroe	Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

·		Г.
	Parker, LLC	956
(<u>Name of the Limited Liability Comp</u> (λ Florida Limited	any as it now appears on our records.) Liability Company)	· · · · · · · · · · · · · · · · · · ·
The Articles of Organization for this Limited Liability Company Florida document number <u>レドロののラみゆ 3み</u> ろ	were filed on 9019	and fissigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>
Enter new mailing address, if applicable: (<u>Mailing address MAY BE A POST OFFICE BOX)</u>	Ν/Α.	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the nan	ne of the new registere
Name of New Registered Agent:	Kayla D. Zeisle	
New Registered Office Address:	950 SE UTDAV Enter Florida street address	<u>e</u>
Por	<u>NAMO BEACH</u> , Florida _	33000 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>	Address	Type of Action
·			□Add
			Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
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			□Change
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			□Change
			□Add
			□Remove
			□Change

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o. Haine	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	Just amending registered agent Current
	PA is invalid. Thank you.
_	
_	
_	
_	
(If an effe <u>Note:</u> I	tive date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated _	November 26. 2019.
	Signature of a member or authorized representative of a member
	Kayla D. Zeisler

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