## L2200134707

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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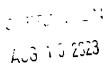
Office Use Only



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## **COVER LETTER**

TO: Registration Sec Division of Corp			
SUBJECT: Pai	rsons Realty	nited Liability Company	
	vame of Lin	nted Etablity Company	
The enclosed Articles of A	mendment and fee(s) are sub	omitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	James Stephen Parsons IV		
		Name of Person	<del></del>
	Parsons Realty, LLC		
		Firm/Company	<del></del>
	10000 Hartford Maroon R	d	
		Address	
	Orlando, FL 32827		
		City/State and Zip Code	-
	jsparsons4@gmail.com		
	E-mail address: (	to be used for future annual report notif	ication)
For further information cor	icerning this matter, please c	all:	
James Stephen Parsons IV		727 505-8758	
Name of E	Person		: 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:		Street Address	

TO:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Parsons Realty, LLC		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)	•
The Articles of Organization for this Limited Liability Company Florida document number <u>L22000134707</u>	were filed on 03/25/2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Tance & Par	sans. UC	20
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or th	ie abbreviation "L.L.C."
Enter new principal offices address, if applicable:	10000 Hartford Maroon Rd	•
Principal office address MUST BE A STREET ADDRESS)	Orlando, FL 32827	
Trincipus office address 1105 1 001 101 101		P
		<u> </u>
Enter new mailing address, if applicable:	10000 Hartford Maroon Rd	25
Mailing address MAY BE A POST OFFICE BOX)	Orlando, FL 32827	
3. If amending the registered agent and/or registered office	address on our records, enter the r	name of the new regist
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Emer variati mreei atarem	
	, Florida	
	City	Zip Code

aw 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>	Name	Address	Type of Action
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			□Remove
			□Change
			□Add
			□Remove
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an effective date is listed, the date ote: If the date inserted in thi				
ocument's effective date on the	e Department of State's re	cords.	•	
record specifies a delayed effer is filed.	ctive date, but not an effec	tive time, at 12:01 a.m. o	n the earlier of: (b) T	ne 90th day after the
April 14th	2023			
	N V			
11 /	/ . / I//			

Filing Fee: \$25.00

Typed or printed name of signee



June 22, 2023

JAMES STEPHEN PARSONS IV 10000 HARTFORD MAROON RD ORLANDO. FL 32827 US

SUBJECT: PARSONS REALTY, LLC Ref. Number: L22000134707

We have received your document for PARSONS REALTY, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

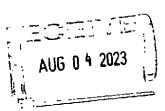
The document number of the name conflict is P18000013567.

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) 245-6051.

Sharon D Franklin Regulatory Specialist II

Letter Number: 223A00014191



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