

L23000300658

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

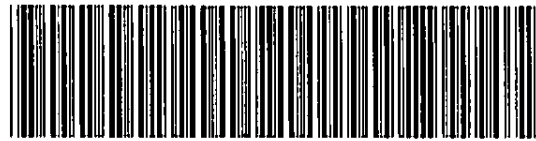
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2023 OCT 11 PM 12:40

RECEIVED  
2023 OCT 11 AM 10:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

R. HUNT  
10/11/23

FLORIDA CAPITAL COURIER SERVICES, INC  
2330 CLARE DRIVE  
TALLAHASSEE, FL 32309  
(850) 524-5437  
(850) 524-6243

Please use funds from this account: 120210000160 **\$30.00**

Authorization Signature: \_\_\_\_\_

Parker Home Service LLC

Business Name

L23000300658

Doc. #

\_\_\_ Certified Copy of

\_\_\_X Certificate of Status

**NEW FILINGS**

- \_\_\_ Profit Corp  
\_\_\_ Not for Profit  
\_\_\_ Officer/Director  
\_\_\_ Limited Liability  
\_\_\_ Domestication  
\_\_\_ Other  
\_\_\_ **CORP**  
\_\_\_ **LLLP**

**AMENDMENTS**

- \_\_\_X Amendment  
\_\_\_ Resignation of R.A.  
\_\_\_ Change of Registered Agent  
\_\_\_ Revocation of Dissolution  
\_\_\_ Merger  
\_\_\_ Conversion  
\_\_\_ Amended and restated Articles  
\_\_\_ Statement of Authority

**OTHER FILINGS**

- \_\_\_ Annual Report  
\_\_\_ Fictitious Name  
\_\_\_ APOSTILLE

Country

**REGISTRATION/QUALIFICATIONS**

- \_\_\_ Foreign filing  
\_\_\_ Limited Partnership  
\_\_\_ Reinstatement  
\_\_\_ Other

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SECRETARY OF STATE  
DIVISION OF CORPORATE AFFAIRS

EXAMINER'S INITIALS: \_\_\_\_\_

## COVER LETTER

**TO: Registration Section**  
**Division of Corporations**  
Parker Home service LLC

**SUBJECT:** \_\_\_\_\_  
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:

DARREN PARKER

\_\_\_\_\_  
Name of Person  
Parker Home Service LLC  
\_\_\_\_\_  
Firm/Company  
5510 3rd st w  
\_\_\_\_\_  
Address  
Bradenton Florida 34207  
\_\_\_\_\_  
City/State and Zip Code  
doodleparker@gmail.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

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DIVISION OF CORPORATIONS  
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For further information concerning this matter, please call:

DARREN PARKER 941 220-8882  
\_\_\_\_\_  
Name of Person at ( )  
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|---|---|--|--|

**Mailing Address:**

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

**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>	<u>Address</u>	<u>Type of Action</u>
AP	Seth Parker	5504 3RD ST W	<input type="checkbox"/> Add
		Remove as Authorized Person	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated October 9, 2023

Darmon Parker

Signature of a member or authorized representative of a member

DARREN PARKER

Typed or printed name of signee