

# L 24000056873

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# **COVER LETTER**

Division of Corp			
Summer Parks	5 } Fanily, LL	.C	
SUBJECT: 1 (1 VC	Name of Limi	ted Liability Company	<del></del>
The enclosed Articles of A	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspor	ndence concerning this matter t	to the following:	
	Benjamin J	Parlas Name of Person	
	Parks 3 Fa	Mily LLC Firm/Company	
		ler Dr. # 1106 Address	
	Oriandu, FL	37504 City/State and Zip Code (2) (XH100k, COM o be used for future annual report no	
	Jevsey Cary 1992 E-mail address: (1	o be used for future annual report to	ntification
For further information co	oncerning this matter, please ca		
Benjamin 1	Partis	at ( <u>423</u> ) <u>300 -</u> Area Code Dayti	O SSII
() Kancor	TCISON	Area Code Dayo	The recipione rander
Enclosed is a check for the	e following amount:		
□ \$25.00 Filing Fee	\$2 \$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 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

Parks ? T-amily	LLC	4124月17日 - 5 7 11日
(Name of the Limited Liabilit (A Florida	v Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability C Florida document number <u>LQ400050873</u>	ompany were filed on $\frac{1/29/202}{}$	4 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ited liability company here:	
The new name must be distinguishable and contain the words "Limiter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDR		or the abbreviation "L.1C."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	l office address on our records, <u>enter th</u>	e name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flori	ida
	City	гір с ойс

## 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>	<u>Address</u>	Type of Action
CEO	Parks, Benjamin, )	1317 Edgewater Dr. 1/02	□Add
		Original, FL. 32804	[2Kemove
		1317 Edgewater Dr. 1102	□Change
MGZ	Parks, Benjamini	Orlando, FL 32804	[I]+ddd
			□Remove
			□Change
			□Add
			□Remove
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(If an eft Note:	ive date, if other than the date of filing:
he recor ord is fi	d 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 led.
Dated	Benjamin Parks  Threed or printed name of signers
	1 KMUILU I WUIV)
	Signature of a member or authorized representative of a member