

PO1000109226

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

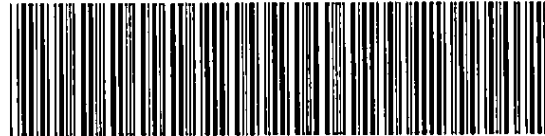
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800407515648

06/13/23--01002--006 **43.75

FILED
2023 JUN 13 AM 10:41
SECRETARY OF STATE
TALLAHASSEE, FL

88 4/13/23



COPY

FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 15, 2023

PARKMAN ELECTRIC, INC.
C/O LITTMAN, SHERLOCK & HELIMS, P.A.
618 E. OCEAN BLVD., SUITE 5
STUART, FL 34994

SUBJECT: PARKMAN ELECTRIC, INC.
Ref. Number: P01000109226

It has been brought to our attention the address of PARKMAN ELECTRIC, INC., listed at 11415 SW FOX BROWN RD INDIANTOWN, FL 34956 (VC CHAIRMAN AS WELL), is incorrect as it belongs to another individual or other entity.

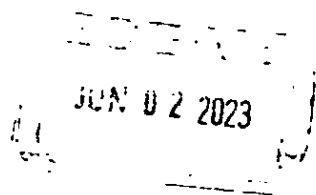
Therefore, the purpose of this letter is to notify this entity: 1.) of the incorrect data; and 2.) that it is a third degree felony to knowingly and willingly falsify or conceal a material fact or make any false, fictitious, or fraudulent statement in any matter within the jurisdiction of the Florida Department of State.

Therefore, the information must be corrected on our records. The Principal, Mailing, & officer/director addresses can be changed at no charge.

Please reply to this letter and provide me with the correct address so that I may correct our records accordingly or contact me by phone at (850) 245-6000.

Sincerely,
Summer L Singleton
Division of Corporations

Letter No: 023A00011051



COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: PARKMAN ELECTRIC INC.

DOCUMENT NUMBER: P01000109226

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

FRANCIS S. PARKMAN

Name of Contact Person

Firm/ Company

626 E. JEFFERSON ST
Address

BOSTON, GA 31626

City/ State and Zip Code

superiorpayroll@att.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FRANCIS S. PARKMAN at (470) 232-5880

Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
|--|--|--|--|

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

FILED
2023 JUN 13 AM 10:41
SECRETARY OF STATE
TALLAHASSEE, FL

Articles of Amendment
to
Articles of Incorporation
of

PARKMAN ELECTRIC INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P01000109226

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

807 WINDTREE WAY
WELLINGTON, FL 33414

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

807 WINDTREE WAY
WELLINGTON, FL 33414

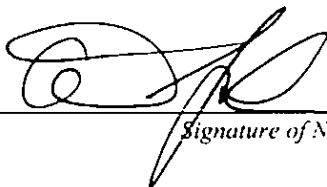
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent SUPERIOR PAYROLL & ACCOUNTING FIRM
6526 S. KANNER HWY., STE 327
(Florida street address)

New Registered Office Address: STUART, Florida 34997
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.



Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

FILED
2023 JUN 13 AM 10:41
SECRETARY OF STATE
TALLAHASSEE, FL

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change. Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

X Change PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <u> </u> Change	<u>VC</u>	<u>NANCY LEAGUE</u>	<u>626 E. JEFFERSON ST</u>
<u> </u> Add			<u>BOSTON, GA 31626</u>
<u>X</u> Remove			
2) <u>X</u> Change	<u>C</u>	<u>FRANCIS S. PARKMAN</u>	<u>626 E. JEFFERSON ST.</u>
<u> </u> Add			<u>BOSTON, GA 31626</u>
<u> </u> Remove			
3) <u> </u> Change			
<u> </u> Add			
<u> </u> Remove			
4) <u> </u> Change			
<u> </u> Add			
<u> </u> Remove			
5) <u> </u> Change			
<u> </u> Add			
<u> </u> Remove			
6) <u> </u> Change			
<u> </u> Add			
<u> </u> Remove			

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

[illegible]

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

[illegible]

05/23/2023

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

05/23/2023

Effective date if applicable: _____
(no more than 90 days after amendment file date)

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.

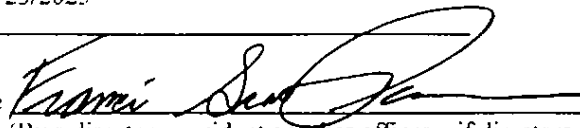
Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____"
(voting group)

05/23/2023
Dated _____

Signature 
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

FRANCIS S. PARKMAN

(Typed or printed name of person signing)

CHAIRMAN

(Title of person signing)