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COVER LETTER

FO: Amendment Section Division of Corporations					
NAME OF CORPORATION: Allard Parker, Inc. PO7000127085					
DOCUMENT NUMBER: PO 100012 087					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Valerie Parker Allard					
Name of Contact Person Allard Parker, Inc.					
Allard Parker, Inc. Firm/Company 1014 Sligh Blyd Orlando, FL 32806					
Orlando, FL 32806					
City/ State and Zip Code					
E-mail address: (to be used for future annual report notification)					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Valerie Parker Allard at 407 648.9121 Name of Contact Person Area Code & Daytime Telephone Number					
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:					
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)					
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Mendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					

Articles of Amendment

to
Articles of Incorporation

Allard Parker, Inc.

AIMOF	arker, i	116.	
(Name of Corporation as o	urrently filed with	the Florida Dept.	of State) 22 14 1 7 7
P070	0012708	5	1023 JAN 17 9
(Document N	umber of Corporation	on (if known)	
ursuant to the provisions of section 607.1006, Florida Status Articles of Incorporation:	tes, this Florida Pro	ofit Corporation ado	pts the following amendm
. If amending name, enter the new name of the corpora	tion:		
			The net
ame must be distinguishable and contain the word "corpora Inc.," or Co.," or the designation "Corp," "Inc," or " chartered," "professional association," or the abbreviation	'Co". A professio	or "incorporated" of nal_corporation_nar	r the abbreviation "Corp., ne must contain the wor
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>	<u> </u>		
Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)			
		wide autouthe per	a of the
 If amending the registered agent and/or registered of new registered agent and/or the new registered office 		ina, enter the name	<u>. or the</u>
Name of New Registered Agent			
	lorida street address)		
New Registered Office Address:		,	Florida
	(City)		(Zīp Code)
New Registered Agent's Signature, if changing Registere	d Aganti		
hereby accept the appointment as registered agent. I am f		cept the obligations	of the position.

Signature of New Registered Agent, if changing

Check if applicable

 \square The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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: \underline{X} Change	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	<u>Christopher Allard</u>	1191 Lemon Bluff Rd
X Add			Osteen, FL 32764
Remove			
2)Change			
Add			<u> </u>
Remove Change			
Add			
Remove			-
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			