

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: FENCE OUTLET PORT RICHEY, LLC
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:

Alton L. Lightsey
Name of Person
Lightsey & Associates, P.A.
Firm/Company
2105 Park Avenue North
Address
Winter Park FL 32789
City/State and Zip Code
rajul.patel@fenceoutletonline.com
E-mail address: (to be used for future annual report notification)

FILED
2013 OCT 31 PM 1:02
TALLAHASSEE FLORIDA
SECRETARY OF STATE

For further information concerning this matter, please call:

Virginia Manning at **(407) 622-0025 x4**
Name of Person Area Code & Daytime 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:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FENCE OUTLET PORT RICHEY, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on June 5, 2013 and assigned Florida document number L1300008163711.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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

11507 US Hwy. 19
Port Richey FL 34668

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

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CLERK OF CIRCUIT COURT
PORT RICHEY, FLORIDA

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____
City Zip Code

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

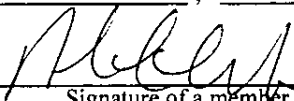
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Rajul K. Patel	9671 S. Orange Blossom Tr.	<input checked="" type="checkbox"/> Add
		Orlando FL 32837	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove

2013 OCT 31 PM 11:32
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 CLERK OF DISTRICT COURT
 11th DISTRICT
 MIAMI, FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated October 30, 2013



Signature of a member or authorized representative of a member

Alton L. Lightsey

Typed or printed name of signee

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Filing Fee: \$25.00

SECRETARY OF STATE
ALLAHASSEE, FLORIDA

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