I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under
oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and
that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LEROY OVERMYER

L

OWNER

01/09/2024

Date

2024 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000028800

Entity Name: THE FENCE MEN, LLC

## **Current Principal Place of Business:**

1142 PRECISION STREET HOLIDAY, FL 34691-5627

## **Current Mailing Address:**

1142 PRECISION STREET HOLIDAY, FL 34691-5627

## FEI Number: 55-0914543

## Name and Address of Current Registered Agent:

OVERMYER, LEROY 1515 RAINVILLE STREET TARPON SPRINGS, FL 34689 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE	E: LEROY OVERMYER			01/09/2024	
	Electronic Signature of Registered Agent			Date	
Authorized Person(s) Detail :					
Title	MGRM	Title	MGRM		
Name	OVERMYER, LEROY	Name	OVERMYER, LEE		
Address	1515 RAINVILLE STREET	Address	1153 PRECISION STREET		
City-State-Zip:	TARPON SPRINGS FL 34689	City-State-Zip:	HOLIDAY FL 34691		

Electronic Signature of Signing Authorized Person(s) Detail

FILED Jan 09, 2024 Secretary of State 6954023569CR

Certificate of Status Desired: Yes