301 NW 5TH OKEECHOB	1 ST BEE, FL 34972 US			
FEI Number: 84-4629453			Certificate of Status Desired: Yes	
Name and A	Address of Current Registered Age	ent:		
REGISTERED				
	RG, FL 33702 US			
		nanging its registered office or regis	tered agent, or both, in the State of I	Florida.
ST PETERSBU	RG, FL 33702 US	nanging its registered office or regis	tered agent, or both, in the State of I	
ST PETERSBU	RG, FL 33702 US d entity submits this statement for the purpose of ch	nanging its registered office or regis	tered agent, or both, in the State of I	Florida. 04/26/202 Date
ST PETERSBU The above named SIGNATURE	RG, FL 33702 US d entity submits this statement for the purpose of ch E: JENNIFER PHILLIPS	nanging its registered office or regis	tered agent, or both, in the State of I	04/26/202
ST PETERSBU The above named SIGNATURE Authorized	RG, FL 33702 US d entity submits this statement for the purpose of ch E: JENNIFER PHILLIPS Electronic Signature of Registered Agent	nanging its registered office or regis	tered agent, or both, in the State of I	04/26/202
ST PETERSBU The above named SIGNATURE Authorized Title	RG, FL 33702 US d entity submits this statement for the purpose of ch E: JENNIFER PHILLIPS Electronic Signature of Registered Agent <b>Person(s) Detail :</b>			04/26/202
ST PETERSBU The above named SIGNATURE	RG, FL 33702 US d entity submits this statement for the purpose of ch E: JENNIFER PHILLIPS Electronic Signature of Registered Agent Person(s) Detail : MGR	Title	MGR	04/26/202

## Entity Name: THE FENCE OUTLAWS, LLC

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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

301 NW 5TH ST OKEECHOBEE, FL 34972

DOCUMENT# L20000023179

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: CECEILIA LAWS

OWNER

04/26/2024

Electronic Signature of Signing Authorized Person(s) Detail

## FILED Apr 26, 2024 Secretary of State 6839795287CC

Date