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Certified Copies	Certificates	of Status
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DIVISION OF CORPORATION

JUL 1 2 2013 T. HAMPTON

COVER LETTER

TO:

Registration Section
Division of Corporations

GUTIERREZ FENCING LLC

SUBJECT:

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:

ADELAIDO GUTIERREZ

Name of Person

GUTIERREZ FENCING LLC

Firm/Company

13753 61st WAY N

Address

CLEARWATER, FL 33760

City/State and Zip Code

latinoexpress2012@gmail.com

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

For further information concerning this matter, please call:

Adelaido Gutierrez

 $_{at}(727)455-7735$

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

GUTIERREZ FENCING LLC

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

•		y 1 (, ,			
The Articles of Organization for this Limited Li	ability Company	y were filed on 05/23	/2005	_ and assig	ned
Florida document number L05000050799				చ	SEIAID
This amendment is submitted to amend the following	owing:			JUL 11	CKE TARK
A. If amending name, enter the new name of	the limited lial	bility company here:		曼	25 S
N/A				=	OR.
The new name must be distinguishable and end wit "L.L.C."	h the words "Lim	nited Liability Company,	'the designation "LLC	or the ab	breviatio
Enter new principal offices address, if applications	able:	N/A			
(Principal office address MUST BE A STREE	T ADDRESS)				
		NI/A			
Enter new mailing address, if applicable:		N/A			
(Mailing address MAY BE A POST OFFICE I	BOX)				
B. If amending the registered agent and/or registered agent and/or the new registered of			records, enter the	name of	<u>the nev</u>
Name of New Registered Agent:	SAME				
New Registered Office Address:	SAME				
		Enter	Florida street addres	S	
			, 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 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>	ype of Action
D	RIGOBERTO GUTIERREZ	5796 ULMERTON RD LOT 313	Add
		CLEARWATER FL 33760	Remove
D	OSCAR GUTIERREZ TALAVERA	13753 61st WAY N	Add
		CLEARWATER FL 33760	Remove
			Add
		L	Remove SECRE!
			LI THE LEGATIONS
			Add Remove
			Add
			Remove

lf amendir	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
<u> </u>	
•	
ed	
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_	Signature of a member or authorized representative of a member
	ADELAIDO GUTIERREZ
_	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

SECRETARY OF STATE ON SECRETARY OF CORPORATIONS