

**LD8000041839**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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**2010 JAN 26 PM 1:39**  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**C. LEWIS**  
**JAN 27 2010**  
**EXAMINER**

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: Total Fence Solutions of SW Fla 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:

Connie Pennington  
Name of Person

Total Fence Solutions  
Firm/Company

11670 Metro Parkway  
Address

Fort Myers, FL 33966  
City/State and Zip Code

cpennington@embargmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Connie Pennington at (239) 275-0732  
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

FILED

Total Fence Solutions of SW Florida, LLC SECRETARY OF STATE  
(Name of the Limited Liability Company as it now appears on our records.) TALLAHASSEE, FLORIDA  
(A Florida Limited Liability Company)

Page 1 of 2

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	Norberto Romero	5426 8th Avenue Fort Myers Fla 33907	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

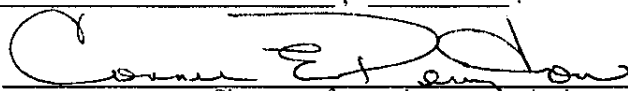
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\_\_\_\_\_

\_\_\_\_\_

Dated \_\_\_\_\_



Signature of a member or authorized representative of a member

Courne E. Pennington

Typed or printed name of signee

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TALLAHASSEE, FLORIDA