## L10000059773

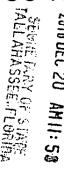
(F	Requestor's Name)
(A	Address)
(/	Address)
(0	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(E	Business Entity Name)
(C	Document Number)
Certified Copies	Certificates of Status
Special Instructions t	to Filing Officer:
	A. LUNT
	DEC 21 2010

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**EXAMINER** 



000188158940



12/20/10--01056--010 \*\*25.00

			COVER LETTER	1
го:	Registration Sec Division of Cor			
SUBJE	CT:	AMERICAN	FENCE SHOP, LLC	
		Name of Limi	ted Liability Company	
The end	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	; ; ;
			ISAAC HENRIQUEZ	
			Name of Person	I
		AMER	ICAN FENCE SHOP, LLC	
			Firm/Company	i
		479	0 EAST 11TH AVENUE	20
			Address	ZOIN DEC
			HIALEAH, FL 33013	C 20
			City/State and Zip Code	M
		ISAAC@A	MERICANFENCESHOP.CO to be used for future annual report notifice	
For fur	ther information co	oncerning this matter, please o	•	ation) Grades
		HENRIQUEZ		81 <b>-</b> 35 <u>11</u>
	Name of	Person	Area Code & Daytime	Celephone Number
Enclose	ed is a check for th	e following amount:		
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 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

AMERICAN FENCE	SHOP, LL	C	1	<del> </del>	
( <u>Name of the Limited Liability Company as</u> (A Florida Limited Liabili	it now appears ity Company)	on our records.)	-		
The Articles of Organization for this Limited Liability Company were	e filed on	06/03/2010	app. App.	_ and as	signed
Florida document number <u>L10000059773</u> .			e e e e e e e e e e e e e e e e e e e		
This amendment is submitted to amend the following:			a s c		
A. If amending name, enter the new name of the limited liability	company here	:	1		
					** ***
The new name must be distinguishable and end with the words "Limited L. "L.L.C."	iability Compan	y," the designation	i <b>"LLC</b> ਹੈ ਭ		abbreviation
Enter new principal offices address, if applicable:				2010	
(Principal office address MUST BE A STREET ADDRESS)	<del></del>		E F	EC.	7]
_			A is A is	20	
		<u> </u>	i jed	H	
Enter new mailing address, if applicable:			35	<del>5</del>	No. of Part
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>		ුණ	<del></del>
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	address on ou	ır records, <u>ente</u>	r the	name	of the nev
Name of New Registered Agent:	11 11 11 11 11 11 11 11 11 11 11 11 11		;		
New Registered Office Address:			,		
	Ente	er Florida street d	addres	s	
	<u> </u>	, Florida			
Ci	ty			Zip Cod	te
Name Descriptional Amounts Clemeture of alternating Descriptional Asserts			t.		

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 amendin	g the Managers or Managing Members <u>ig Member being added or remoyed froi</u>	on our records, <u>enter the title, name, an</u>	d address of each Manager
MGR = Mi		<u> </u>	
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	GILBERTO S. FERNANDE	4790 E 11 Ave Hialeah, FL 33013	Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amer	iding any other information, enter chang	ge(s) here: (Attach additional sheets, if nece	TALL TO Add  TALL TO ADD ADD ADD ADD ADD ADD ADD ADD ADD AD
Dated		010	: :
		g.or onthorized representative of a member AAC HENRIQUEZ	i
		d or printed name of signee Page 2 of 2	
		THEC A OLA	·

Filing Fee: \$25.00