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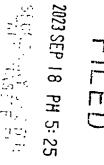
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COVER LETTER

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TO: Registration Section Division of Corporations	
SUBJECT: Gulf Fence and Name of Limited	Construction, LLC Liability Company
The enclosed Articles of Amendment and fee(s) are submitted	ed for filing.
Please return all correspondence concerning this matter to t	he following:
Charles	Burke Denny Name of Person
Gulf Fen	ce and Construction
730 N Hia	hway 231
Panama Ci	ty FL 32405 City Suite and Zip Code
Christie Bau	L fewe Con. Come e used for future annual report notification)
For further information concerning this matter, please call:	
Christic Grentry Name of Person	at (850) 2\5-6706 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
S25.00 Filing Fee S30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 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 Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Cor (A Florida Limit	ompany as it now appears on our records.) ited Liability Company)
The Articles of Organization for this Limited Liability Compa Florida document number <u>L\600005\9.65</u> .	pany were filed on 3-15-2016 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited l	liability company here:
The new name must be distinguishable and contain the words "Limited Li	Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS	Ω
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered offi agent and/or the new registered office address here: Name of New Registered Agent:	fice address on our records, enter the name of the new registered
New Registered Office Address:	
new negative Office Address.	Enter Florida street address
-714-01111	. 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 605, 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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Melissa Way	730 US HUY 231	□Add
		730 US HUY 231 Panama City, FL 340=	Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
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			□Remove

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an effect iote: If	date, if other than the date of filing:
record s I is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated	9/15/23
	M
	Signature of a member or authorized representative of a member Charles Burle Dengy Typed or printed name of signee

Filing Fee: \$25.00