L16000145412

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e#)
(Cit	yrotaterzipie none	~ "' <i>j</i>
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer.	
1		
<u></u>		

Office Use Only



400289180494

08/23/16--01012--013 **30.00

AUG 22 AM 8: 56 200 AUG 22 P 12: 2 SECRETARY DESTAT AHASSEE, FT ORIDATALLAHASSEE; FLORI

MIG 24 2013

COVER LETTER

TO: Registration Sec Division of Corp		Re &		
16 v.	· 4	S		
SUBJECT:	aywood Fen	ce LLC		
	Name of Limit	ed Liability Company		
The enclosed Articles of A	mendment and fee(s) are subm	nitted for filing.		
Please return all correspon	dence concerning this matter to	the following:		
	willi	am T Hayw	000	
	Hayu	wood Fence L	_LC	
	8156	Carmona	<u>St.</u>	
		arre Fl 329 City/State and Zip Code		
	E-mail address: (to	wood Fence @ () be used for future annual report notifi	amail.com	
For further information con	ncerning this matter, please cal	l:		
Willia Name of	m Haywood	at (850) 889 - 1 Area Code Daytime	5777 ALLANG AUG 22	
Enclosed is a check for the	e following amount:		Y OF S	
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Section 1 \$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

Haywood Fen	cc LLC			
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company	were filed on August 3,	2014	and assign	ed
Florida document number 81-3492140	J			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or	the abbro	eviation "L.L.C.	"
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)	· · · · · · · · · · · · · · · · · · ·			
	We had			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)			Name de la constanta de la con	
			·····	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		nter th	ne name of	the new
registered agent and/or the new registered office address here	:	E SE	2016	
Name of New Registered Agent:	***************************************	AR AR No.	a T	1
New Registered Office Address:		XEY VSSE	22	·
	Enter Florida street address		D 12:	<u> </u>
	City, Florid	18 <u>55</u>	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>	<u>Address</u>	Type of Action
AMBR	Austyn Erwin	9264 Ridge Rd Navarre	FL X Add
			□ Remove
			□ Change
			Add
			Remove
			Change
	W W C C C C C C C C C C C C C C C C C C		Add
			C Remove
		+471\$ - ***********************************	Change
		FOR ARTHUR PROPERTY OF THE PRO	Add
		ASSEE, FLORI	Remove-
		77	□ Remove
			Change
		-	Add
			C Remove
			□ Change

Aus	tyn	Erwin	wil	lown	10	Do of	Haywa	od Fen
							1	
		,						
			.			 		
				<u> </u>	• •		<u> </u>	
-								
 								
		·····						
				_ "				
								
							ا پنتاج ،	
						•		
							A F	
							ASS	i Con i
							m _S	\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \
· · · · · · · · · · · · · · · · · · ·			·	·····				
							023	<u> </u>
tive date, if	other th	an the date	of filing:	Augu	st 18,	2014	(optional)	28
							days after filing.) ents, this date v	
		n the Departm			J	B . adana	iona, inib care v	
cord spec	ifies a d	elayed effe	ctive date,	, but not ar	effective	time, at	12:01 a.m. o	n the earl
90th day	, after th	he record is	filed.					
- Auc	ust	18,20	<u>16, _</u>	<u></u> .				
•	,	-		TO		>		
			A					
		Signat	ure of a memp	of authorize	d representativ	e of a memb	cr ^	

Page 3 of 3

Filing Fee: \$25.00