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## **COVER LETTER**

Division of Corporations		
SUBJECT: Species Fenc	cina 110	
	Name of Limited Liability Company	
•		
The enclosed Articles of Amendment and fo	fee(s) are submitted for filing.	
Please return all correspondence concerning	g this matter to the following:	
mike	e Splars	
	Name of Person	:·
Spears	S Fencing UC Firm/Company	
4568 B	Barbados Loop	•
Clema	Ont , FL 34711  City/State and Zip Code	· · · .
E-n	mail address: (to be used for future annual report notification)	•
For further information concerning this made	atter, please call:	
Mike Spears	467 - 487 - 93101	
Name of Person	Area Code Daytime Telephone Number	=
Enclosed is a check for the following amou	unt:	
Certificate		tatus &
	and the second s	*
Mailing Address:	Street Address:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Spears tencing UC	
(Name of the Limited Liability Company as it now appea (A Florida Limited Liability Company)	rs on our records.)
	11/13/2017
The Articles of Organization for this Limited Liability Company were filed on	DROKEN FRACIONAMINI and assigned
florida document number <u>L17000234094</u> .	
·	
his amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company h	ere:
he new name must be distinguishable and contain the words "Limited Liability Company." the	lesignation "L.L.C" or the abbreviation "L.L.C."
Parks and the first of the second sec	
Enter new principal offices address, if applicable:	~
Principal office address MUST BE A STREET ADDRESS)	<u> </u>
	<u> </u>
Enter new mailing address, if applicable:	1
Mailing address MAY BE A POST OFFICE BOX)	=======================================
	0.
3. If amending the registered agent and/or registered office address on our regent and/or the new registered office address here:  Name of New Registered Agent:	records, enter the name of the new regis
Name of New Registered Agent.	
New Registered Office Address:	
Enter Flo.	rida street address
	, Florida
Cirv	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 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
MGR	Mike Spears	4568 Barbados Loop	□Add
		Clemont, FL 34711	□Remove
			Change
MGR.	Jamie Speas	4568 Barbados Losp	XAdd
		Cleimont, FL 34711	□Remove
		<u> </u>	□Change
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	date, if other than the date of filing: (optional)  ve date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020
e: If	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
ument	's effective date on the Department of State's records.
	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
s filed.	
~~	une 12, 2020
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Typed or printed name of signee