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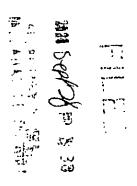
	(Requestor's Name)
	(Address)
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PICK-UF	P WAIT MAIL
	(Business Entity Name)
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Certified Copies	Certificates of Status
Special Instructions	s to Filing Officer:
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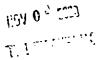
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COVER LETTER

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enn inær.		ĆRIS FENCES LLC		
SUBJECT:		Name of Limi	ited Liability Company	
The enclose	d Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return	n all correspo	ondence concerning this matter	to the following:	
		RAUL A BALMASEDA		
			Name of Person	
		ALEXA & CRIS FENCES	LLC	
			Firm/Company	
		427 Hancock bridge pkwy	unit 6	
			Address	
		cape coral, FL 33990		
		alexa2115@gmail.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report not	ification)
For further i	information c	oncerning this matter, please ea	all:	
YEISEL CA	ASIANO		239 703-2352	
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is	a check for th	ne 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)
	ailing Addres		Street Address:	
	gistration S	Section Corporations	Registration Sc Division of Co	
	O Boy 632		The Centre of	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ALEXA & CRIS FENCES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	01/10/20	110		
	were filed on OFFFFE	110 22 F	and assigne	d
Florida document number 1.18000017743				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
			fi.	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designa	tion "LLC" or	the abbreviation "L.L.C."	•
Enter new principal offices address, if applicable:	4991 Dean ST	**	(હ) (છ)	.
(Principal office address MUST BE A STREET ADDRESS)	Fort myers, FL 33905	<u> </u>		
Enter new mailing address, if applicable:	4991 Dean ST			
(Mailing address MAY BE A POST OFFICE BOX)	Fort myers, FL 33905	i		
Intuiting dutiess in AT BL AT OST OFFICE BON				
D. If amonding the registered agent and/or registered office.	addross on our rugors	le antar tha	nome of the new res	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	address on our recore	ls, <u>enter the</u>	name of the new res	eistere
agent and/or the new registered office address here:	address on our record		name of the new res	gistere
agent and/or the new registered office address here: Name of New Registered Agent:	Enter Florida sti	ree; uddress		eistere
agent and/or the new registered office address here: Name of New Registered Agent:	Enter Florida sti			zistere
agent and/or the new registered office address here: Name of New Registered Agent:	Enter Florida sti City	ree; uddress	la	eistere

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
MGR	RAUL A BALMASEDA	427 HANCOCK BRIDGE PKWY UNIT 6	
		CAPE CORAL, FL 33990	■Remove
			□Change
AMBR	YEISEL CASIANO	4991 Dean st	□Add
		FORT MYERS, FL 33905	□Remove
			Change
			□ Add
			□Remove
			□ Change
			□ Add
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Iffective date, if other fan effective date is listed, the Note: If the date inserted document's effective date	in this block does	not meet the appl	or to date of tiling or nicable statutory filir	(option nore than 90 days after t ag requirements, this	nal) iling.) Pursuant to 605.0207 date will not be listed as
record specifies a delayed is filed.	d effective date, b	ut not an effective	time, at 12:01 a.m.	on the earlier of: (b)	The 90th day after the
		2020	A		
Dated 31, AUGUST		7			
Dated 31, AUGUST	Signature	12 cut	horized representative	e of a member	

Filing Fee: \$25.00