118000/62674

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COVER LETTER

TO:

FO:	Registration Sect Division of Corp-	tion orations		
		ENCE BUILDERS, LLC		
SUBJE	CT:	Name of Limite	d Liability Company	
The enc	closed Articles of A	amendment and fee(s) are subm	itted for filing.	
Please 1	eturn all correspon	idence concerning this matter to	the following:	
		Jill Singer		
			Name of Person	
		All-Pro Fence Builders, LLC		
			Firm/Company	
		2820 Pillsbury Way		
			Address	
		Wellington, FL 33414		
		allprofencebuilders@gmail.co	City/State and Zip Code om	
		E-mail address: (t	o be used for future annual report n	otification)
For fu	rther information c	oncerning this matter, please ca	H:	
Jill Si	nger		561 323-8970	
	Name e	of Person	Area Code Days	ime Telephone Number
Enclo	sed is a check for t	he 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)
	Regist Divisi	ANG ADDRESS: tration Section on of Corporations	STREET/COU Registration Se Division of Co Clifton Buildin	porations
		Box 6327 nassee, FL 32314	2661 Executive Tallabassee, FI	Center Circle

Taliahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ALL-PRO FENCE BUILDERS, 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 were filed on July 5, 2018 and assigned Florida document number _____L18000162674 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enterregistered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

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 ador removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Justin Brimlow	1244 NE 18+LAVE Fr. Laverrale, Fl 33304	Add
			Remove
			Change
			Remove
			Change
			□ Remove
			Change
			□ Remove
			☐ Change
			□ Remove
			☐ Change
			Remove
			☐ Change

	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Note	effective date, if other than the date of filing:
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: se 90th day after the record is filed.
Date	1 August 26 . 2019.
	Signature of a member or authorized representative of a member
	Till Singer Typed or printed name of signee

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Filing Fee: \$25.00