# L19000073055

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### **COVER LETTER**

	Registration S Division of Co			
SUBJEC		ı Fence, LLC		
.,obji.c		Name of Lim	ited Liability Company	<del></del>
		of Amendment and fee(s) are sub-	_	
		Joshua P Middleton		
		Middleton Fence, LLC	Name of Person	
		P.O. Box 601	Firm/Company	
		Oxford, FL 34484	Address	
		jessicaarnstein@gmail.com		
For furthe	er information	E-mail address: () concerning this matter, please ca	to be used for future annual report notif all:	ication)
Joshua P	Middleton		352 303-8266	<u>.</u>
	Name	of Person	at ()	e Telephone Number
Enclosed	is a check for	the following amount:		
\$25.0	0 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)

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

Middleton Fence, LLC			
(Name of the Limi	ted Liability Comp (A Florida Limited	any as it now appears on our re Liability Company)	ecords.)
The Articles of Organization for this Limited L	Liability Compan	y were filed on March 14, 20	and assigned
Florida document number L19000073055	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name o	of the limited lia	bility company here:	
No Change			
The new name must be distinguishable and contain the	words "Limited Liab	oility Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli-	cable:	No Change	
Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		No Change	FILE PAUG 2 PALLAH/SS
3. If amending the registered agent and registered agent and/or the new registered o	l/or registered office address he	office address on our rec re:	cords, enter the name of the ne
Name of New Registered Agent:	No Change		
New Registered Office Address:	No Change		
		Enter Florida street a	ddress
			, Florida
	•	Ciņ <sup>,</sup>	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, <u>enter the title</u>, <u>name</u>, <u>and address of each person being added or removed from our records</u>:

#### MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Joshua P Middleton	11620 CR 239 Oxford, FL 34484	<b>≅</b> Add
			☐ Remove
			Add
			□ Remove
			Change
		<del></del>	Remove
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	n/a	
Effective date, if other than th	e date of filing:	(optional)
f an effective date is listed, the date m	ust be specific and cannot be prior to date of film block does not meet the applicable statutor	ng or more than 90 days after filing.) Pursuant to 605.0207 (; y filing requirements, this date will not be listed as the
ne record specifies a delaye The 90th day after the re		tive time, at 12:01 a.m. on the earlier of:
Dated August 19,	2019	
	<u>of 101</u>	
/ \	1111 1111	

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Typed or printed name of signee

Filing Fee: \$25.00