L200000 33918

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	Address)
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(Document Number)	
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D. BRUCE SEP 2 9 2020

COVER LETTER

Division of Corporations	
SUBJECT: Cas is Fencing 44C	
Grand Committee and Committee	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Brackley A Brooks	
Oasis Fencing LLC Firm/Company	
3738 Papai Dr Address	
Sa resorta Floricles 34232 City/State and Zip Code bradbrook 52 Danail Com E-mail address: (to be used for future annual report notification)	2020 AUG 10 AM 8: 25
For further information concerning this matter, please call:	0 ₽
Curcy/yn Browns at (941) 720-0967 Name of Person Area Code Daytime Telephone Number	8: 25
Enclosed is a check for the following amount:	
\$30.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \Bigcup \$55.00 Filing Fee & \Bigcup \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address: Street Address:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF O(S) Fencing LLC

(Name of the Limited Liability Co (A Florida Lim	ompany as it now appears on our nited Liability Company)	records.)	
The Articles of Organization for this Limited Liability Comp Florida document number <u>L 2000003397.8</u>	pany were filed on Jan/	AS, 2020 and assigned	
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 I	Liability Company," the designation	n "LLC" or the abbreviation "L.L.C."	_
Enter new principal offices address, if applicable:			_
(Principal office address MUST BE A STREET ADDRESS	<u>S)</u>		
		2020 AU SECKE TALL	_
Enter new mailing address, if applicable:		<u> </u>	_~*
(Mailing address MAY BE A POST OFFICE BOX)			—:. :
B. If amending the registered agent and/or registered off	fice address on our records,	enter the name of the new regist	ered
agent and/or the new registered office address here:			
Name of New Registered Agent:			
New Registered Office Address:			
New Negistered Office Address.	Enter Florida street	address	
		, Florida	
	City	, Florida Zip Code	_
New Registered Agent's Signature, if changing Registered Ag	ent:		
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compaccept the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change.	lete performance of my duti as provided for in Chapter	ies, and I am familiar with and 605, F.S. Or, if this document is	

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

Title Name Address Type of Action

MGR	John T Sellers	3150 Jamaica St	□Add	
		3150 Jamaica St Sarasoter Fl 34231	Remove	
			□Change	
			□Add	
			□Remove	
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E. Effec	tive date, if other than the date of filing: 48 2020 (optional) flective 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 60	AS 0202 /2\
Note	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list nent's effective date on the Department of State's records.	sted as the
If the reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day aft filed.	ter the
record is t		
record is to	Aug 8 2020	

Filing Fee: \$25.00