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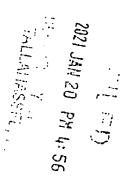
(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

Registration Section

TO:

Division of Cor	porations			
OCC FENC	JE L.L.L.C	•		
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	ORDANIEL CARDOSO	ALFONSO		
		Name of Person		
	OCC FENCE L.L.L.C			
		Firm/Company		
	6526 W HANNA AVE			
		Address		
	TAMPA, FL. 33634			
		City/State and Zip Code		
	ordanielcardoso9@gmail.cc E-mail address: (om to be used for future annual report ne	otification)	
For further information c	oncerning this matter, please c	all:		
ORDANIEL CARDOSC) ALFONSO	512 7380600		
Name o	f Person	at () Area Code Dayt.	ime Telephone Number	
Enclosed is a check for the	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)	
Mailing Address Registration		Street Address:	Section	
Registration Section Division of Corporations		-	Registration Section Division of Corporations	
P.O. Box 632	27	The Centre of		
Tallahassee, 1	FL 32314	2415 N. Mon	roe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OCC FENCE L.L.L.C		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny a <u>s it now appears on our records.</u>) iability Company)	
he Articles of Organization for this Limited Liability Company	were filed on 02/13/2020	and assigned
orida document number L20000050460		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liabi	lity company here:	
OCC FENCE LLC		
he new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or	the abbreviation "L.L.C."
inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		202 SE
		#11 J
nter new mailing address, if applicable:		A C
Mailing address MAY BE A POST OFFICE BOX)		
Turning undress MATE DE ATTOST OFFICE BOAY		
		<u> </u>
. If amending the registered agent and/or registered office a	ddress on our records, enter the	e name of the new regist
gent and/or the new registered office address here:		
Name of New Registered Agent:	·	
New Registered Office Address:		
test registered vittee radiess.	Enter Florida street address	
	. Floric	da
	City , FIOTIC	ua 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

Title	<u>Name</u>	Address	Type of Action
			□Add
			□ Remove
			□Change
			□Remove
			□Change
			□Add
			□Remove
			□Change
	.		□Add
			□ Remove
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ffecti	ve date, if other than the date of filing: (optional)
<u>ote:</u>	we date, if other than the date of filing:
recor is fil	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
ated	01/15/2021
	v Air
	Signature of a member or authorized representative of a member
	ORDANIEL CARDOSO ALFONSO