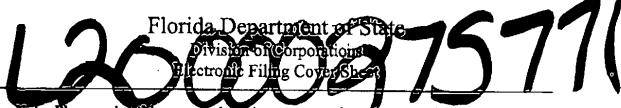
Division of Corporations

2/8/23, 1:25 PM



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations:

Fax Number : (850)617-6383

From:

Account Name : LICENSES & PERMITS LLC

Account Number : I20210000155 Phone : (305)226-8727 Fax Number : (305)226-8767

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SOSA'S FENCE LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

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(FAX)

COVER LETTER

	Registration ! Division of Co			
SUBJEC	SOSA'S F	ENCE LLC		
000000	·	Name of Li	mited Liability Company	
The enclo	sed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
Plcase ret	um all corresp	ondence concerning this matte	r to the following:	
		LUCIA ESTRELLA		
			Name of Person	
		LICENSES & PERMITS		
			Firm/Company	
		8300 WEST FLAGLER S	T	
			Address	
		MIAMI, FL 33144		
			City/State and Zip Code	
		LICENSES114@GMAIL.C		
For further	information o	E-mail address: (concerning this matter, please c	to be used for future annual report :	notification)
LUCIA ES	STRELLA		305 226-8727	
	Name o	of Person		time 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)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	niling Addres		Street Address:	
	egistration S vision of C		Registration S	
	O Box 632		Division of C	

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SOSA'S FENCE LLC		r
(Name of the Limited Lia (A Fig	ability Company as it now appears on our records.) orida Limited Liability Company)	
The Articles of Organization for this Limited Liabilit	y Company were filed on 09/03/2020	and assigned
Florida document number L20000275771		_
This amendment is submitted to amend the following	3;	
A. If amending name, enter the new name of the b	limited liability company here:	
he new name must be distinguishable and contain the words "I	Limited Liability Company," the designation "LLC" or the abbre	eviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET AD	DRESS)	
nter new mailing address, if applicable:		
Malling address MAY BE A POST OFFICE BOX		
 If amending the registered agent and/or register gent and/or the new registered office address here 	red office address on our records, enter the name o	f the new regist
com animal the new tensiered white address ner	<u>e</u> .	20
Name of New Registered Agent:		2023 F
Maint of New Achisters Agent.		<u>ده</u>
New Registered Office Address:		<u> </u>
	Enter Florida street address	
	, Florida	
	City	Ztp 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

		•	
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	SOSA, ROLANDO	3814 8TH SW	Add
		LEHIGH ACRES, FL 33976	□Remove
			Change
 ,			□Add
			□Remove
			Change
			□Add
			□ Remove
			☐ Change
			□Add
			□ Remove
			□Change
			□ Add
			□Remove
,	•		ĊChange
- 			
			Remove
•			□ Change

Signature of a member or authorized representative of a member	vi sincodi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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