

L21000016175

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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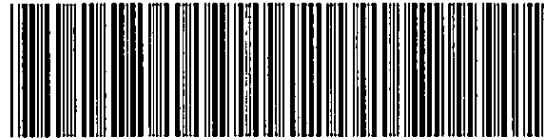
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FAST PRO FENCE LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LAZARO MESA LA NUEZ

Name of Person

FAST PRO FENCE LLC

Firm/Company

333 ROCKLAND ST

Address

LEHIGH ACRES / FLORIDA 33972

City/State and Zip Code

LAZAROMESA62@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LAZARO MESA

239

645-9856

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

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

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FAST PRO FENCE 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 FLORIDA and assigned
Florida document number L21000016175.

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

333 ROCKLAND ST

LEHIGH ACRES, FL 33972

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

333 ROCKLAND ST

LEHIGH ACRES, FL 33972

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

LAZARO MESA LA NUEZ

New Registered Office Address:

333 ROCKLAND ST

Enter Florida street address

LEHIGH ACRES

City

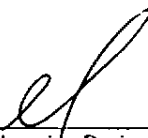
Florida 33972

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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, 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>	<u>Address</u>	<u>Type of Action</u>
MGR	LAZARO MESA LA NUEZ	333 ROCKLAND ST	<input checked="" type="checkbox"/> Add
		LEHIGH ACRES, FL 33972	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	MEDEROS NOVAL, FELIX C	652 VALLEY AVE	<input type="checkbox"/> Add
		LEHIGH ACRES, FL 33974	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	MESA LA NUEZ, LAZARO	416 WILLIAMS AVE	<input type="checkbox"/> Add
		LEHIGH ACRES, FL 33972	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	FRANK MICHEL POLANCO	402 CONLEE ST	<input checked="" type="checkbox"/> Add
	<i>Almequer</i>	LEHIGH ACRES, FL 33074	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated MARCH 24 2021

ARCH 24

Signature of a member or authorized representative of a member

LAZARO MESA LA NUEZ

Typed or printed name of signee

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