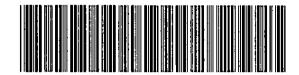
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2022 AUG 30 AH II: 48 SECRETARY OF STATE

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COVER LETTER

Div	ision of Corp	orations				
cup men	MIRANDA	FENCE MASTERS LLC				
SUBJECT:		Name of Lim	ited Liability Company			
The enclosed	I Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspon	ndence concerning this matter	to the following:			
		YUNIESKY MIRANDA F	ERNANDEZ			
	Name of Person					
MIRANDA FENCE MASTERS LLC						
	Firm/Company					
	3104 3RD ST W					
			Address		•	
	LEHIGH ACRES / FL 33971					
			-			
	YUNIESKYMIRANDA28@GMAIL.COM					
			to be used for future annual report notific	ation)	S Z	
For further i	nformation co	oncerning this matter, please c	all:		ECF	9
YUNIESKY	/ MIRANDA	FERNANDEZ	941 250-9742 at ()		UG 30	
	Name of	Person	Area Code Daytime	Telephone Number	ESSE FOR YEAR	Section 2
Enclosed is	a check for th	e following amount:			2022 AUG 30 MM 11: 487 SECRETARY OF STATES TALLAMASSEE. FL	Const.
□ \$25.00°	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	© \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ning rec, ne of Status &	

TO:

Registration Section

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MIRANDA FENCE MASTERS 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 $\frac{APR}{}$ 29, 2022 and assigned Florida document number 1.21000282170 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address . Florida

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.

City

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
AR	ROSABEL REYES PEREZ	3104 3RD ST W	
		LEHIGH ACRES FL 33971	■Remove
			□ Change
AR	YORDANKY MIRANDA FERNA	3104 3RD ST W	= Add
		LEHIGH ACRES FL 33971	□Remove
			□Change
			□Add
			□Remove
		 	SECRETARY'S TALLAHIAS
			LANAS ST. OF CREMOVE
			Si On Difference
·			□Add
			□Remove
			□Change
	· · · · · · · · · · · · · · · · · · ·		□Add
			□Remove
			□ Change

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d is filed.	e will not be list	ted as t
d is filed.		
Dated 08 107 . 2022.	ne 90th day afte	er the
3/1///		
$2/M/M_{\odot}$		
Signature of a member or authorized representative of a member		

Typed or printed name of signee