8/4/23, 1:36 PM

Division of Corporations



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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H230002714843ABC3

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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 DANIEL FENCE LLC

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Page Count	01
Estimated Charge	\$25.00

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AUG 0 5 2023

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COVER LETTER

DANIEL SUBJECT:	PENCE LLC						
SUBJECT: Name of Limited Liability Company							
The enclosed Articles o	f Amendment and fec(s) are su	ubmitted for filing.					
Please return all corresp	ondence concerning this matte	-					
	LUCIA ESTRELLA						
		Name of Person					
	LICENSES & PERMITS	SLLC .					
Firm/Company							
8300 WEST FLAGLER ST Address							
					MIAMI, FL 33144		
	**************************************	City/State and Zip Code					
	LICENSES114@GMAIL.	(to be used for future annual report notification)					
or further information of	concerning this matter, please of	•					
LUCIA ESTRELLA		305 226-8727 at ()					
Name of Person		at (
inclosed is a check for t	he following amount:						
\$25.00 Filling Pee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)					
Majiing Addres	wit •	Street Address.					
Mailing Addres Registration S Division of C	Section	Street Address: Registration Section					

P.O. Box 6327 Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

filed on 02/24/2022	and a	ssigned
<u> </u>		
ompany here:		
mpany," the designation "LLC" or the s	bbreviation "	L.L.C."
	•	
		
s on our records, <u>enter the nan</u>	ne of the ne	w regist
	- 1285 -	23_
	<u> </u>	AUG
Enter Florida street address		<u>+</u> =
, Florida	<u> </u>	<u> </u>
y	Zip Code	<u> </u>
		 ယ ମ ြွ with i
	es on our records, <u>enter the nan</u>	Enter Florida street address Florida Zip Code

If Changing Registered Agent, Signature of New Registered Agent

08/04/2023 · 02:12

MGR = Manager

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			☐ Change
			TRemove
			Change
		_	□Add
			□Remove
			□Change
		-	□Add
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			☐ Change
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			☐ Remove
			Change
			
		-	□ Remove

(If an et Note:	tive date, if other than the date of filing: (optional) (ffective 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 605.0 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ment's effective date on the Department of State's records.
If the reco	and specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after to filed.
	AUGUST 3 2023
Dasad	
Dated	Just -
Dated	- Just

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