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## **COVER LETTER**

**Division of Corporations** THE FENCE LIFE GROUP LLC · SUBJECT: \_ 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: Jose Quintana Name of Person THE FENCE LIFE GROUP LLC Firm/Company 426 W. PIERCE AVE Address ORLANDO, FL 32809 City/State and Zip Code thefencelifegrouplle@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Jose Quintana Name of Person Daytime Telephone Number Enclosed is a check for the following amount: ☐ \$25.00 Filing Fee **S**30.00 Filing Fee & □ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Mailing Address:

TO:

Registration Section

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE FENCE LIFE GROUP LLC	
(Name of the Lim	tited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited l	Liability Company were filed on 08/22/2022 and assigned
This amendment is submitted to amend the fol	llowing:
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 appli	icable:
(Principal office address MUST BE A STRE	ET ADDRESS)
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE	E BOX)
	58 6 7
B. If amending the registered agent and/or agent and/or the new registered office address.	registered office address on our records, enter the name of the new register ess here:
Name of New Registered Agent:	Jose J Quintana   Mar 50 = 5
New Registered Office Address:	426 W PIRICE AVE Offendo FT 55
	Offunda, 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.

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>	Address	Type of Action
CEO	Jose J. Quintana	426 W. Pierce Ave., Orlando, Fl. 32809	■Add
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Tan effective date, if other than t	he date of filing: (optional) nust be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020
<b>lote:</b> If the date inserted in this	block does not meet the applicable statutory filing requirements, this date will not be listed as
ocument's effective date on the	Department of State's records.
	tive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
d is filed.	
August 25	2022
Oated	
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	Signature of a member or authorized representative of a member
Jose Quintana	Typed or printed name of signee