L23000258142

(Requestor's Name)	
(Requestors Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Districts Littly Harrey	
(Document Number)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	





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2023 JUL -5 KM 7:27



COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Cor	rporations		
BAY TO B	AY FENCING LLC		
SUBJECT:			
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	BOBBY HERNANDEZ		
	.	Name of Person	·
	BAY TO BAY FENCING I		
		Firm/Company	
	103 LATHET PO	Box 255 · B	·H
		Address	
	WIMAUMA FLORIDA 33	598	
	BAYTOBAYFENCING@G	City/State and Zip Code MAIL.COM	
	E-mail address: (to be used for future annual report no	tification)
For further information of	concerning this matter, please co	all:	
BOBBY HERNANDEZ		813 944-8530	
		at ()	
Name o	of Person	Area Code Daytii	me Telephone Number
Enclosed is a check for t	he 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 Addres	•	Street Address:	
Registration		Registration Se	
Division of C		Division of Co	-
P.O. Box 632	<u>.</u> /	The Centre of	i ananassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2023 JUL -5 Kii 7:27

Zip Code

BAY TO BAY FENCING LLC	- 30L -5 KH 7:27
(Name of the Limited Liability Company as it now appears on our records (A Florida Limited Liability Company)	Q. And St. Com
The Articles of Organization for this Limited Liability Company were filed on	
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, <u>enter tagent and/or the new registered office address here</u> :	he name of the new registe
Name of New Registered Agent:	
New Registered Office Address:	<u> </u>
Enter Florida street address	
, Flo	rida

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>	<u>Address</u>	Type of Action
MGR	Bobby Hernandez	P.O. Box 255 Wimauma FL, 33598.	≅ Add
			□Remove
			□Add
			Remove
			□Change
			□Remove
			□Change
			□Add
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ective date, if other than t	ne date of filing:		(optional)	(05.0303
neffective date is listed, the date neter if the date inserted in this				
cument's effective date on the	Department of State's record	is.		
cord specifies a delayed effec s filed.	tive date, but not an effective	: time, at 12:01 a.m. on	the earlier of: (b) The 90tl	h day after the
June 28	2023			
- ha		 ·		
hedh				
hed	MUN			
hed halle	Signature of a member or au	thorized representative of	f a member	