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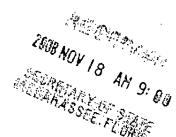
DIVISION OF CORPORATIONS

OR NOV 18 PM 20 CY

Anund, 18

COVER LETTER

TO: Amendment Section Division of Corporations



			1488 ST 850
NAME OF CORPOR	ATION: Proline	Fonce and Go	ete Inc
DOCUMENT NUMBI	er: <u>PO5 000</u> 2	X65697	
The enclosed Articles of	f Amendment and fee a	re submitted for filing.	
Please return all corresp	ondence concerning thi	s matter to the following:	
<u> </u>	ichael or (Name o	Leean Wick of Contact Person)	cett
Proli	ne Fence +	Gate (nc.	
268	55 NE 102	(Address)	
ant	hony, Fl. 32	,	
For further information	concerning this matter,	please call:	
	ontact Person)	at (<u>352</u>) <u>336</u> (Area Code & Daytim	- 7200 e Telephone Number)
Enclosed is a check for	the following amount m	nade payable to the Florida De	partment of State:
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section		Street Address Amendment Section	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 3, 2008

MICHAEL WICKETT PROLINE FENCE & GATE, INC. 2655 NE 102 LN ANTHONY, FL 32617

SUBJECT: PROLINE FENCE & GATE INC.

Ref. Number: P05000065697

We have received your document for PROLINE FENCE & GATE INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

It appears you wish to make a change with the officers/directors.

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

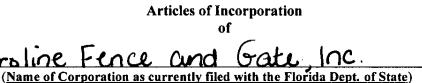
If you have any questions concerning the filing of your document, please call (850) 245-6964.

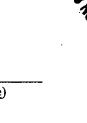
Letter Number: 908A00055961

Irene Albritton
Regulatory Specialist II

Division of Corporations - P.O. ROY 6397 - Tallahassaa Florida 39314

Articles of Amendment to Articles of Incorporation





P0500065697

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

ssociation," or the abbreviation "P.A."		
Enter new principal office address, if appli Principal office address <u>MUST BE A STREET</u>		
Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFIC</u>	<u>E BOX</u>)	
If amonding the registered agent and/or re	agistared office address in Florida	enter the name of the
If amending the registered agent and/or renew registered agent and/or the new registered agent and/or the new registered agent agent and/or the new registered agent age		enter the name of the
		enter the name of the
new registered agent and/or the new registered		enter the name of the
Name of New Registered Agent:	tered office address: (Florida street address)	 , Florida
<u>Name of New Registered Agent:</u>	tered office address:	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:
(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>siden</u> t	Michael L. Wickell	2686 NEWZ LN anthonyfi 82617	Add to detail
· · · · · · · · · · · · · · · · · · ·	 		Add Remove
			_
			<u> </u>
			_
E. If amendi	ng or adding additional Articles, enter c	hange(s) here:	
	litional sheets, if necessary). (Be specific		
F. If an am	endment provides for an exchange, recla		ssued shares.
	endment provides for an exchange, recla ns for implementing the amendment if n	assification, or cancellation of i	
provision		assification, or cancellation of i	
provision	ns for implementing the amendment if n	assification, or cancellation of i	
provision	ns for implementing the amendment if n	assification, or cancellation of i	
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provision	ns for implementing the amendment if n	assification, or cancellation of i	
provision	ns for implementing the amendment if n	assification, or cancellation of i	

Th	e date of each amendment(s) adoption:
Efi	(no more than 90 days after amendment file date)
Ad	option of Amendment(s) (<u>CHECK ONE</u>)
Ø	The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
	The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
	"The number of votes cast for the amendment(s) was/were sufficient for approval
	by"
	(voting group)
	The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
	The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
	Dated
	Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	Secretary (Title of person signing)