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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Atlantic Fence and Fabricating			
DOCUMENT NUMB	PL 2020254624	PL	0000054624
The enclosed Articles of	of Amendment and fee are sul	bmitted for filing.	
Please return all corres	pondence concerning this mat	tter to the following:	
	Todd R. McCoy		
-	Name of Contact Person		
	Atlantic Fence and Fabricating		
-	Firm/ Company		
	1550 Lake Disston Drive		
-	Address		
	Bunnell, Florida 32110		
-	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Code	-
,	eydiemccoy@gmail.com		
-	E-mail address: (to be us	ed for future annual report	notification)
For further information	a concerning this matter, pleas	se call:	
Edith E. McCoy		at (386-931-223	28
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made p	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment to Articles of Incorporation of

2021 APR 14 AVIII. 311

Atlantic Fence & Fabricating Incorporated	7 M///
(Name of Corporation as current	ly filed with the Florida Dept. of State)
PL0000054624	•
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," " "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
D. C. and J. C. and J. C. and J. and	103 Deen Rd.
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Bunnell, Florida 32110
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	WA
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent	
VEI Fide st	reet address)
New Paristana d Office Address	Florida
New Registered Office Address.	(City) (Zip Code)
New Registered Office Address:	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	t: with and accept the obligations of the position.
M	
Signature of New I	Registered Agent, if changing

Check if applicable

■ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe	
X Remove	\underline{V}	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change		_ , \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

tach additional sh	ling additional Articles, enter change(s) here: weets, if necessary). (Be specific)	
	·····	
		_ .
		<u> </u>
<u></u>		
		
<u> </u>		
an amendment p	rovides for an exchange, reclassification, or cancellation of issued shares,	
rovisions for imp (if not applicat	olementing the amendment if not contained in the amendment itself: ole, indicate N/A)	
_ -		-
<u>.</u>		

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more than 90 days after amenament file date)	
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, this expartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ac action was not required.	opted by the incorporators, or board of directors without shareholder ac	tion and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes east for the amendmen ufficient for approval.	ıt(s)
	proved by the shareholders through voting groups. The following states each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
Todd R. McCoy	"	
by	(voting group)	
04/12/202 Dated	l	
Signature	Todd R MC Cy lirector, president or other officer – if directors or officers have not been	
select	ed, by an incorporator – if in the hands of a receiver, trustee, or other conted fiduciary by that fiduciary)	
	Todd R. Mecoy	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	