P14000075060

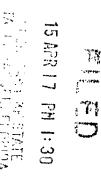
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bı	siness Entity Name	<u>)</u>
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Certified Copies	_ Certificates o	of Status
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Special Instructions to	Filing Officer:	
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(IRM) 42115

	COVER LETTER		Je (4
TO: Amendment Section Division of Corporations		·	
NAME OF CORPORATION: IDEAL FE	NCE INC		Top one
DOCUMENT NUMBER: P140000750	060		
The enclosed Articles of Amendment and fee are su	bmitted for filing.		Şm
Please return all correspondence concerning this man	tter to the following:		
KEN CLAYTOI	V	•	
	Name of Contact Person	n	
IDEAL FENCE			
	Firm/ Company		
8278 BLAIKIE		-, · · · · · · · · · · · · · · · · · · ·	
	Address		
SARASOTA FI	_ 34240		
	City/ State and Zip Cod	e	
VEN 010 - 41 - 55 - 11	·		
KEN@IDEALFEN			
E-mail address: (to be us	ed for future annual report	notification)	
For further information concerning this matter, pleas			
KEN CLAYTON	at (941	<u>,</u> 866-1577	
, Name of Contact Person	Area Co	de & Daytime Telephone Nui	mber
Enclosed is a check for the following amount made p	payable to the Florida Depa	artment of State:	
\$35 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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301	

Articles of Amendment Articles of Incorporation

	Articles of Incorporation		Fe 5	
IDEAL FENCE INC				7.3
(Name of Corporation as current	tly filed with the Florida Dent	of State)		(see to
P14000075060	,	<u> </u>		, T
	er of Corporation (if known)			
·	•			
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this <i>Florida Proj</i>	fit Corporation ado	pts the following amen	dment
A. If amending name, enter the new name of the	ne corporation:			
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "C word "chartered," "professional association," or	Corp," "Inc," or "Co". A pro	ny," or "incorpora fessional corporati	The nted" or the abbrevic on name must contain	ution
B. Enter new principal office address, if applic	able:			
(Principal office address <u>MUST BE A STREE</u> T)		-	 -	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u> </u>		<u></u>	
D. If amending the registered agent and/or reg		d <u>a, enter the name</u>	of the	
new registered agent and/or the new registe	ered office address:			
Name of New Registered Agent				
	(Florida street address)			
N. B		F1 '4		
New Registered Office Address:	(City)	, Florida	(Zip Code)	
	. 27			
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age	Registered Agent: ont. I am familiar with and acc	ept the obligations (of the position.	
Signature o	of New Registered Agent, if cha-	nging		

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.

Example: X Change	PT Joh	nn Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	SV Sal	ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	MGR	CHRISTOPHER MILENKI	8278 BLAIKIE CT
Add			SARASOTA FL 34240
Remove			
2) Change			
Add			
Remove			
3) Change			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ng additional Art eets, if necessary).	(Be specific)				
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a <u>n amendment bro</u>	ovides for an excl	hange, reclassi endment if not	lication, or can contained in th	<u>cellation of issi</u> e amendment i	<u>ied shares,</u> tself:	
rovisions for imple	a indicata N/A)					
rovisions for imple (if not applicable	e, maicute (VA)					
rovisions for imple	e, maituie WA)					
rovisions for imple	e, maicale (VA)					
rovisions for imple	e, maituie (VA)					
rovisions for imple	e, maiture (V/A)	· · · · · · · · · · · · · · · · · · ·				
rovisions for imple	e, maiture (V/A)					
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rovisions for imple	e, marture (V/A)					
rovisions for imple	e, marture (V/A)					

The date of each amendment(s) adoption: 4/8/2015	, if other than the
date this document was signed.	
Effective date if applicable: 4/08/2015	
(no more than 90 days after amendment	file date)
Adoption of Amendment(s) (CHECK ONE)	·
The amendment(s) was/were adopted by the shareholders. The number of votes cast for by the shareholders was/were sufficient for approval.	or the amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the a	
"The number of votes cast for the amendment(s) was/were sufficient for approval	l
by))
The amendment(s) was/were adopted by the board of directors without shareholder act action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action a action was not required. Dated 4/8/2015	
Signature (By a director, resident or other officer – if directors or office selected, by an incorporator – if in the hands of a receiver, true appointed fiduciary by that fiduciary)	
KEN CLAYTON	
(Typed or printed name of person s.	igning)
PRESIDENT	
(Title of person signing)	