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PICK-UP WAIT MAIL
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Special Instructions to Filing Officer: Correct Name on doc Need corp. Supply for new Corp. Name





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FLORIDA DEPARTMENT OF STATE Division of Corporations

March 23, 2015

LEOVIGILDO CARRIZALES 2912 N PINEWAY DR PLANT CITY, FL 33566

SUBJECT: LEO FENCE INC Ref. Number: P15000021743

wing correction(s):

of collections

of the entity named in your document. A computer printout intity is enclosed for your review. If this is the right name, document and return it for filing.

The name indust contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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) 245-6050.

Rebekah White Regulatory Specialist II

Letter Number: 515A00005722

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16 MAN OF COSPORATION

TALL ANA SSEE, FLORIDA

Articles of Amendment to Articles of Incorporation of

PILED

LEO FENCE INC

15 APR -9 PH 3:38

(Name of Corporation as currently filed with the Florida Dept. of State) CHETALLE P15000021743

(Name of Corporation as currently filed with the Florida Dept. of State) CHETALLE STATE

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(Name of Corporation as currently filed with the Florida Dept. of State) CHETALLE

(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:

name must be distinguishable and con "Corp.," "Inc.," or Co.," or the desig word "chartered," "professional associ	ntain the word "corporation," "company," on nation "Corp," "Inc," or "Co". A profession ation," or the abbreviation "P.A."	Th or "incorporated" or the abbre onal corporation name must con
B. Enter new principal office address (Principal office address <u>MUST BE A</u>		
C. Enter new mailing address, if app		
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·
). If amending the registered agent a	nd/or registered office address in Florida, en	iter the name of the
. If amending the registered agent a new registered agent and/or the ne	nd/or registered office address in Florida, en	ter the name of the
	w registered office address:	· · ·
new registered agent and/or the ne	w registered office address:	· · ·
new registered agent and/or the ne	ew registered office address: LEOVIGILDO CARRIZALE	· · ·
new registered agent and/or the ne	LEOVIGILDO CARRIZALE 2912 N PINEWAY DR (Florida street 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)

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 X Remove X Add	<u>V</u> <u>Mi</u>	nn Doe ke Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>VP</u>	ORLANDO GOMEZ	2811 LOYD HUMPHREY LN
Add			PLANT CITY, FL 33566
X Remove			
2) X Change	PD	LEOVIGILDO CARRIZALES	2912 N PINEWAY DR
Add			PLANT CITY, FL 33566
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(attach additional sheets, if necessary). (Be specific)
AMENDING THE LAST NAME OF THE PRESIDENT
LEOVIGILDO CARRIZALEZ FOR LEOVIGILDO CARRIZALES
CORRECT THE LAST NAME "S"
REMOVE ORLANDO GOMEZ

The	date of each amendment this document was signed		, if other than the
date : Effe			
		(no more than 90 days after amendment file date)	
Ada	option of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/w was/were sufficient for ap	vere adopted by the members and the number of votes cast for the amendment(s) oproval.	
	There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
	Dated 03/	15/2015	
	Signature	Georgello Convoles	
	have r	Mairmun or vice chairman of the board president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
	LEOVI	GILDO CARRIZALES	
		(Typed or printed name of person signing)	
	PRESI	DENT	
	-	(Title of person signing)	