P930000(0139

(Re	equestor's Name)		
(Address)			
(Ad	dress)		
(Cit	ty/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	isiness Entity Nai	me)	
(Do	ocument Number)	
Certified Copies	_ Certificate	s of Status	
Special Instructions to	Filing Officer:		
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10/19/10--01012--018 **35.00



May 11/2

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: Carter Fence Company, Tuc				
DOCUMENT NUMBER: P9300066139				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Betty Jacquet Name of Contact Person				
Carter Fence Company, Ivc				
3490 Shearwater St				
Naples 71. 34117 City/ State and Zip Code				
E-mail address: (to be used for future armual report notification)				
For further information concerning this matter, please call:				
Name of Contact Person at (239) 353-4102 Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee \$\ \text{Certificate of Status} \text{Status} \text{Status} \text{Status} \text{Certified Copy} & Certifi				
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301				





FLORIDA DEPARTMENT OF STATE Division of Corporations

October 22, 2010

BETTY JACQUET 3490 SHEARWATER ST NAPLES, FL 34117

SUBJECT: CARTER FENCE COMPANY, INC.

Ref. Number: P93000066139

We have received your document for CARTER FENCE COMPANY, 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):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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) 245-6957.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 710A00025072

RECEIVED

10 NOV -1 AM 9: 02

SECRETARY OF STATE
ANASSEE, FLORIDA

Articles of Amendment

to Articles of Incorporation of

Carter Fo	suro Combo	TUT, UN	
(Name of Corporation as curre	ently filed with the Florida	Dept. of State)	Allen My
P92 N	2006/0129		
(Document Num	nber of Corporation (if know	vn)	
Pursuant to the provisions of section 607.100e amendment(s) to its Articles of Incorporation:	6, Florida Statutes, this <i>Flo</i>	orida Profit Corporation a	adopts the following
A. If amending name, enter the new name of	f the corporation:		
			The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	designation "Corp," "Inc,	" or "Co". A profession	
B. Enter new principal office address, if app	licable:		
(Principal office address <u>MUST BE A STREE</u>	TADDRESS)		
			
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)	<u>:</u> <u>CE BOX</u>)		
			<u></u>
	-		
D. If amending the registered agent and/or r		Florida, enter the name	of the
new registered agent and/or the new regis	stered office address:		
Name of New Registered Agent:			
New Registered Office Address:	(Florida street ac	ddress)	
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered a		nd accept the ohligations o	f the position.
	Signature of New Registered	l Agent if changing	
5	-g. marar e of Front Registered	And and a changing	

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	^ •
SĪD	Betty Jacquet	Sasi agnd cts	NE Add Change Remove	man thal
			_	
			_	
	ling or adding additional Articles, enter Iditional sheets, if necessary). (Be speci			
provisio	nendment provides for an exchange, recons for implementing the amendment if of applicable, indicate N/A)			
				
			· · · · · · · · · · · · · · · · · · ·	

•	. 11
The date of each amendment	
Effective date <u>if applicable</u> :	(date of adoption is required)
<u>a apparatio</u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/web by the shareholders was/web	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement and 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/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated	10/13/10
sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Title of person signing)