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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPORATION	· Nation	al Fence 8	É RAIling Co. INC.	
DOCUMENT NUMBER:		15 0000 253		
The enclosed Articles of Amen	dment and fee are sub	mitted for filing.		
Please return all correspondence	e concerning this matte	er to the following:		
	Sandr Ational Fo ZZ S.W	Nume of Contact Person  Poce & Rai  Firm/ Company  Address	reet  La 33060	
E-n  For further information concern	fo	d for future annual report	e and Railing. Com	
Name of Contact	r Person	at (Area Co	ode & Daytime Telephone Number	
Enclosed is a check for the follo	owing amount made pa	yable to the Florida Depa	artment of State:	
_	43.75 Filing Fee & ertificate 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 Add	-		Address	

**Division of Corporations** 

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

## Articles of Amendment

to
Articles of Incorporation

of

NATIONAL Fence &	Kailing Co. INC.
<del></del>	ly filed with the Florida Dept. of State)
f 95 000	0 25 335
(Document Number o	of Corporation (if known)
rsuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	Florida Profit Corporation adopts the following amendmen
If amending name, enter the new name of the corporation:	N/A The new
me must he distinguishable and contain the word "corporatio forp.," "Inc.," or Co.," or the designation "Corp." "Inc," or ' ord "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
	<u> </u>
Enter new principal office address, if applicable: principal office address MUST BE A STREET ADDRESS )	11/50 F T
incipal office address most be A STREET ADDRESS	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
	SSE 13 E
	- P
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
	AFT 9
16din alternational control of the distance of the state of the	to the Charles and the Charles
If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
The state of the s	<u>~</u> ~ ~ ~ /
Name of New Registered Agent	/ <del>/</del>
	No.
(Florida str	reet address)
(Florida str	reet address)  Florida (City)  (Zip Code)

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.

Nike Jones, v as Kem	ove, ana sany sm	um, sv as an Ada.	
Example: X Change	PT Joh	n Doe	
X Remove	<u>V</u> <u>Mik</u>	ce Jones	
X Add	<u>SV</u> <u>Sall</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>P</u>	Sandra Kovic	1170 Tropical Dr. Jupiter FL 3345
X Add			Jupiter FL 3345
Remove			
2) Change			
Add			<del></del>
Remove			
3) Change			
Add			
Remove			·
4) Change			·
Add			
Remove			·
5) Change			
Add			
Remove			
6) Change	<del>.</del>		
Add			
Remove			

<u>, enter change(s) here</u> : <i>Be specific)</i>
<del></del>
<u>.</u>
$\Lambda_{I}$
<b>X</b>
No
````
;
· .
>
e, reclassification, or cancellation of issued shares,
nent if not contained in the amendment itself:
N/A
N/A

	, if other than the
date this document was signed.	
Effective date if applicable:	
(no	nore than 90 days after amendment file date)
Note: If the date inserted in this block does not m document's effective date on the Department of State	et the applicable statutory filing requirements, this date will not be listed as the records.
Adoption of Amendment(s) (CHECK	<u>ONE</u> )
☐ The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for appro	olders. The number of votes east for the amendment(s) al.
☐ The amendment(s) was/were approved by the sha must be separately provided for each voting grou	holders through voting groups. The following statement entitled to vote separately on the amendment(s):
"The number of votes cast for the amendme	(s) was/were sufficient for approval
by	
(voting g	oup)
☐ The amendment(s) was/were adopted by the board action was not required.	of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the incoraction was not required.	orators without shareholder action and shareholder
Dated August /	1, 2018 Lu E. Kovic
	Lu & Kovii
(By a director, president	r other officer – if directors or officers have not been
	or – if in the hands of a receiver, trustee, or other court
appointed fiduciary by t	it fiduciary)
	ANDRA E. Kovic
(Турс	or printed name of person signing)
	retary & Treasurer
	(Title of person signing)