P96000005833

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entity Figure)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





600372931016

09/21/21--01017--019 ++43.79



A. Butter (0/8/21

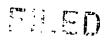
COVER LETTER

Name of Corporation
ation to Change/Add Officer(s) and/or Director(s) and fee are
g this matter to the following:

nal report notification)
ter, please call:
at (321 508-0206) Area Code & Daytime Telephone Number
Area Code & Daytime Telephone Number
orida Department of State for the following amount:
☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed) □ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
Street Address:
Amendment Section
Division of Corporations The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



Palm Bay Fence, Inc		5001.000
(Name of Corporat	ion as currently filed with the Flo	orida Depetof State) At 7: 39
96000005833		A Commonweal Commonwea
(Docui	ment Number of Corporation (if kn	own) 15.12.1 SEF E
ursuant to the provisions of section 607,1006, Florid s Articles of Incorporation:		
If amending name, enter the new name of the c	corporation:	
		The new
ame must be distinguishable and contain the word "c 'Inc.," or Co.," or the designation "Corp," "Inc, 'chartered," "professional association," or the abbr	," or "Co". A professional corp	rporated" or the abbreviation "Corp.," poration name must contain the word
. Enter new principal office address, if applicable	<u></u>	
Principal office address <u>MUST BE A STREET AD</u>		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
). If amending the registered agent and/or registe	ered office address in Florida, ent	er the name of the
new registered agent and/or the new registered		
Name of New Registered Agent		
мате од нем кедменеа лдет		
		- 11
	(Florida street address)	
New Registered Office Address:		Florida
	(City)	(Zip Code)
ew Registered Agent's Signature, if changing Research hereby accept the appointment as registered agent.		obligations of the position.
Sion	nature of New Registered Agent, if c	hanoino
Sign	мане ој нев педменеа идена у с	munguig
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)

Example:

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	Y	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	<u>v</u>	Lindsey Paternoster	580 Cadillac Cir W
X Add			Melbourne, FL 32935
Remove			
2) Change	<u>S</u>	Rosemarie Pinchera	7590 Greenboro Dr #7
X Add			W. Melbourne, FL 32904
Remove Change		_	
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change		_	
Add			···
Remove			
6) Change			
Add			
Remove			

	ditional sheets, if necess	sary). (Be specific)			
					
			<u></u>		
	·				
	······································				
					
					
			,		
If an ame	ndment provides for a	n exchange, reclassi	fication, or cancella	ation of issued share	S.
provision	s for implementing th	e amendment if not	contained in the ar	nendment itself:	-
(if no	ot applicable, indicate N	//A)			
_					
	<u></u>				
· · · · · · · · · · · · · · · · · · ·					

. .

.

	9/16/2021		
The date of each amendment(s) ad	option:		, if other than the
date this document was signed.			
Effective date if applicable:			
	(no more than 9	0 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep		cable statutory filing requirements, this da	ite will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
■ The amendment(s) was/were adoption was not required.	oted by the incorporators, or b	board of directors without shareholder acti	on and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf		e number of votes cast for the amendment(s)
		ough voting groups. The following statems vote separately on the amendment(s):	ent
"The number of votes east f	or the amendment(s) was/we	re sufficient for approval	
Glenn Paternoster		**	
·//	(voting group)	 ,	
9/16/2021 Dated	1		
Signature			
selected.		er – if directors or officers have not been e hands of a receiver, trustee, or other cour)	1
(Glenn W Paternoster		
-	(Typed or printed)	name of person signing)	
ſ	resident		

(Title of person signing)