G91955

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PICK-UP WAIT MAIL		
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RAChange
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COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJE	JECT: ABILITY LOCK AND KEY, INC (Name of Corporation)	
DOCU	UMENT NUMBER: G91955	
	enclosed Statement of Change of Registered Office/Agent and for	ee are submitted for filing
	e return all correspondence concerning this matter to the follow	· ·
1 10430 1	e retain an correspondence concerning and matter to the follow	mg.
	JUAN ALI	
	(Name of Contact Person)	·
ABILITY LOCK AND KEY, INC (Firm/Company)		
	(Firm/Company)	
	916 N MYRTI F AVF	
	916 N. MYRTLE AVE (Address)	
	JACKSONVILLE, FLORIDA 32204	
	(City/State and Zip Code)	
For furt	urther information concerning this matter, please call:	
JUAN	N ALI at (904	v 355-0793
	(Name of Contact Person) at (904) (Area C) 355-0793 Code & Daytime Telephone Number)
Enclose	osed is a \$35.00 check made payable to the Department of State.	
	Mailing Address: Stree Amendment Section Am	eet Address: endment Section
		rision of Corporations
	<u>-</u>	fton Building
		1 Executive Center Circle

Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	provisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of FLORIDA
	er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: ABILITY LOCK AND KEY, INC
2. The principal	office address: 916 N. MYRTLE AVENUE, JACKSONVILLE, FL 32204
3. The mailing a	ddress (if different): SAME
4. Date of incorp	poration/qualification: MARCH 19, 1984 Document number: G91955
	d street address of the current registered agent and registered office on file with the timent of State:
	JEROME L. NOISETTE
	1122 DANIEL STREET
	JACKSONVILLE, FL 32204
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	JUAN ALI
	916 N. MYRTLE AVENUE
	JACKSONVILLE, FL 32204
	
The street address as changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so be board, or the corporation has been notified in writing of the change.
Guganatu (Signatu	Tuan Ali President Tran (Printed or typed name and title)
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete performance of I am familiar with and accept the obligation of my position as registered agent. Or, if this not filled merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
Que	pature of Registered Agent) 7-10-67 (Date)
11 signing on be	half of an entity:
(ī	yped or Printed Name)
	* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)