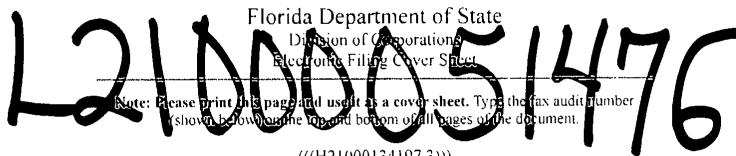
4/5/2021

Division of Corporations



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COVER LETTER

	egistration Se ivision of Cor				
eub irot		TH WIZARD LLC			
SUBJECT:Name of Limited Liability Company					
The enclose	ed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please retu	rn all correspo	ndence concerning this matter	to the following:		
		Cheyenne Moseley			
			Name of Person	33-54 5000	
		Legalzoom.com, Inc.			
			Firm/Company		
		101 N Brand Blvd 11th Fl			
			Address		,
		Glendale, CA 91203		~	
			City/State and Zip Code		,
		mattm61@gmail.com		<u> </u>	,
			to be used for future annual report not	ification)	
For further	information c	oncerning this matter, please c	all:		
Cheyenne	Moseley		800 773-0888 at ()		
Name of Person			Area Code Daytin	ne Telephone Number	
Enclosed is	s a check for th	ne following amount:			
S25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Centificate of Status & Certified Copy (additional copy is enclosed)	
	Registr Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 rassee, FL 32314	STREET/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C	on orations	

Tallahassee, FL 32301

LegalZoom.com, Inc.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LOCKSMITH WIZARD LLC			was a specific beginning maps to 80 arm 4114		
(Name of the Limites	4 Liability Compa A Florida Limited	ny as it now appears on our Liability Company)	records.)		
The Articles of Organization for this Limited Liability Company were filed on 01/28/2021 and assigned					gned
Florida document number L21000651476	·				
This amendment is submitted to amend the follow	aring:				
A. If amending name, enter the new name of	the limited liab	ility company here:			
				•	2021
The new name must be distinguishable and contain the wo	rds "Limited Liabi	lity Company," the designation	i "LLC" or the abbrev	viation "L.1	i Ging
Enter new principal offices address, if applica	błe:	235 Watson Drive		7.7.	50
(Principal office address MUST BE A STREET		Indialantic, Florida 3290)3	****	U)
					<u> </u>
				37.1	<u>ب</u>
Enter new mailing address, if applicable:		235 Watson Drive		1 1 1	<u>~i</u>
(Mailing address MAY BE A POST OFFICE B	30X)	Indialantic, Florida 3290)3 		
		منطقت فاست سيسبب ويوميسون و و و و و الشاه الديد ماديد به و يوميس			·· ······
B. If amending the registered agent and/or registered agent and/or the new registered off Name of New Registered Agent:		œ:	ecords, enter the	e nanie	of the pe
New Registered Office Address:	Enter Florida street address				
	Indialantic		, Florida, 32903	ida: 32903	
		Cùy		Zip Code	
New Registered Agent's Signsture, if changing R	egistered Agent	Ę			
I hereby accept the appointment as registered provisions of all statutes relative to the prope accept the obligations of my position as regis	r and complete	eperformance of my dut	ies, and I am fam	uliar win	h and

being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

LagalZoom.com, Inc.

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
AMBR	Matthew D. Mestayer		D Add
			П Кепюче
		235 Watson Drive Indialantic, Florida 32903	Change
***			☐ Add
			□ Remove
			□ Change
***			<u>~</u>
			Removed
			Change A
			(~ · · ·
			☐ Change
مستند بفنسيدين			D Add
		and a second	O Remove
			Change
			bbA 👊
			□ Remove
			☐ Change

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Filing Fee: \$25.00