

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L22000189190

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : LAXMY'S CARRIER SERVICES
Account Number : I20040000007
Phone : (305)640-0281
Fax Number : (305)489-2902

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address:

laxmy@2001@pinko.com

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2022 SEP -6 AM 10:30

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
LOCK 731 LLC**

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Corporate Filing Menu

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SEP 07 2022

2022 Sep -6 PM 4:26

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: LOCK 731 LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

OMAR PEREZ

Name of Person

LOCK 731 LLC

Firm/Company

20766 SW 81ST PL

Address

CUTLER BAY, FL 33189

City/State and Zip Code

laxmyc2001@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LAXMY CHACON

305 640-0281
at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LOCK 731 LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 04/20/2022 and assigned Florida document number L22000189190.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: _____

(Principal office address MUST BE A STREET ADDRESS) _____

Enter new mailing address, if applicable: _____

(Mailing address MAY BE A POST OFFICE BOX) _____

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____
City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is 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

