

**L24000419129 998**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : UNITED ACCOUNTANTS LLC  
Account Number : I20230000115  
Phone : (813)773-4973  
Fax Number : (813)440-4499

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

Email Address: \_\_\_\_\_

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

**AFFORDABLE LOCKSMITH GROUP LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

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K. SALY

DEC 26 2024

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** AFFORDABLE LOCKSMITH GROUP 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 HMIEDAN ALASMAR

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

14330 58TH ST N APT 1106

\_\_\_\_\_  
Address

CLEARWATER, FL 33760

\_\_\_\_\_  
City/State and Zip Code

INFO@UNIACC.NET

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

For further information concerning this matter, please call:

OMAR HMIEDAN ALASMAR

813 5156321

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**

AFFORDABLE LOCKSMITH GROUP LLC

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

**FILED**  
2024 DEC 23 PM 3:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 10/29/2024 and assigned  
Florida document number L24000459998.

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:

14330 58TH ST N

**(Principal office address MUST BE A STREET ADDRESS)**

APT 1106

CLEARWATER, FL 33760

Enter new mailing address, if applicable:

14330 58TH ST N

**(Mailing address MAY BE A POST OFFICE BOX)**

APT 1106

CLEARWATER, FL 33760

**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:

OMAR HMIEDAN ALASMAR

New Registered Office Address:

100 ASHLEY DR S 600

*Enter Florida street address*

TAMPA

Florida 33602

*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

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	OMAR HMIEDAN ALASMAR	100 ASHLEY DR S	<input type="checkbox"/> Add
		600	<input type="checkbox"/> Remove
		TAMPA, FL 33602	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

2014 DEC 23 PM 3:50  
CLERK'S OFFICE  
COUNTY OF HILLSBORO  
FLORIDA


FILED

SECRET  
INFORMATION

FILED  
2024 DEC 23 PM 3:50  
SECURITY  
11-17-24

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (h) The 90th day after the record is filed.



OMAR HMIEDAN ALASMAR

**Filing Fee: \$25.00**