P04000032065

(Re	equestor's Name)	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
(Ad	ldress)		
(Ad	dress)		
(Cit	:y/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nan	ne)	
(Do	cument Number)		
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			
		4	
		1	

Office Use Only



200108637262

08/27/07--01020--033 **35.00

FILED

07 SEP 18 PM 12: 57

SECRETARY OF STATE

Varion on

COVER LETTER

Division of Corporations
SUBJECT: HAPPY FACE LOCKSMITH, INC. (Name of Corporation)
DOCUMENT NUMBER: P0400032065
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Contact Person)
Atufor
(Firm/Company)
214 SW (02 CT (Address)
MIAMI FI 33174 (City/State and Zip Code)
For further information concerning this matter, please call:
Arcturo MuelcA at (305) 207-6177 (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Amendment Section

TO:

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



August 29, 2007

ARTURO MUGICA 214 SW 102 CT MIAMI, FL 33174

SUBJECT: HAPPY FACE LOCKSMITH, INC.

Ref. Number: P04000032065

We have received your document for HAPPY FACE LOCKSMITH, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

If you are changing the registered agent info, please fill out part 6 of your form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Letter Number: 907A00051955

Carol Mustain Document Specialist

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

statement of char	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida in Inge is submitted for a corporation organized under the laws of the State of to change its registered office or registered agent, or both, in the State of 1	Florida
1. The name of t	he corporation: HAPPY FACE LOCKSMITH, INC.	
2. The principal	- /-	
3. The mailing a	ddress (if different):	
4. Date of incorp	poration/qualification: 2-12-04 Document number: PO	4000032065
	street address of the current registered agent and registered office on file w tment of State:	ith the
	YAKELIN GONZALEZ	ì
	8261 NW 85T #437	ļ
	MIAM F1 33126	SI SI
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered of	7 SEP
	YAKELIN GONZALEZ	SEE, J
	214 SW 102 CT	
	(P.O. Box NOT acceptable) MIAMI C(33174	57
The street addre	ss of its registered office and the street address of the business office of it be identical.	s registered agent,
Such change wa authorized by th	s authorized by resolution duly adopted by its board of directors or by an e board, or the corporation has been notified in writing of the change.	officer so
di	the Anturo Mug	
	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and com my duties, and I am familiar with and accept the obligation of my position s document is being filed merely to reflect a change in the registered offic that the corporation has been notified in writing of this change.	,
	Char 7-10-0	7
(Signing on bel	half of an entity: (Date)	
. (Т	yped or Printed Name)	

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

* * * FILING FEE: \$35.00 * * *