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EFFECTIVE DATE

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COVER LETTER

TO: Amendment Section
Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION:	GARY'S LOCK AND SAFE, INC.
DOCUMENT NUMBER:	P04000102919
The enclosed Articles of Amendment	and fee are submitted for filing.
Please return all correspondence conce	rning this matter to the following:
	TRACY L. CLAYTON
	Name of Contact Person
·	SARY'S LOCK AND SAFE, INC.
	Firm/ Company
	4801 ROBIN DRIVE
	Address
	ST. CLOUD, FL 34772 City/ State and Zip Code
9	aryslocksafe@netzero.net
E-mail address	(to be used for future annual report notification)
For further information concerning the	s matter, please call:
Tracy L. Clayton Name of Contact Person	at (407) 572-5172 Area Code & Daytime Telephone Number
	amount made payable to the Florida Department of State:
_	
□ \$35 Filing Fee □ \$43.75 Filing F Certificate of S	
Mailing Address Amendment Section	Street Address Amendment Section
Division of Corporations	Division of Corporations

Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment FFFECTIVE DATE **Articles of Incorporation** of GARY'S LOCK AND SAFE, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P04000102919 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the for amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: GARY'S LOCK AND SAFE, INC. (Principal office address MUST BE A STREET ADDRESS) 4801 ROBIN DRIVE ST. CLOUD, FL. 34772 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) GARY'S LOCK AND SAFE, INC. <u>4801 ROBIN DRIVE</u> ST. CLOUD, FL 34772 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: TRACY L. CLAYTON Name of New Registered Agent: 4801 ROBIN DRIVE New Registered Office Address: (Florida street address) ST. CLOUD Florida 34772

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

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

(City)

Signature of New Registered Agent, if changing

(Zip Code)

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u> P,D</u>	TRACY L. CLAYTON	4801 ROBIN DRIVE ST. CLOUD, FL 34772	
<u>S, T</u>	STEPHANIE R. CLAYTON	4801 ROBIN DRIVE ST. CLOUD, FL 34772	☑ Add □ Remove
P, D	GARY B. BRETCH	2915 WINDSONG LANE ST. CLOUD, FL 34772	Add Z Remove
FET	-27-259875.	3	
provisi	mendment provides for an exchange, roots for implementing the amendment mot applicable, indicate N/A)		
-	·		

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>S, T</u>	BARBARA B. BRETCH	2915 WINDSONG LANE ST. CLOUD, FL 34772	
			
	•		
<u>provisi</u>	mendment provides for an exchange, ons for implementing the amendment applicable, indicate N/A)	reclassification, or cancellation o t if not contained in the amendme	f issued shares, ent itself:

The date of each amendmen	t(s) adoption: 05 19 10
Effective date if applicable:	(date of adoption is required)
entective date in applicable.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) tere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement and for each voting group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/were sufficient for approval
by	.,
·	(voting group)
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated_05/	19/10
Signature _	Mary Bills
	y a director president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court
	pointed fiduciary by that fiduciary)
	GARY B. BRETCH
	(Typed or printed name of person signing)
	INCORPORATOR
	(Title of person signing)