# P04000127980

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#### COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORAT	ion: Affordo	able Locksm	th Services Inc
DOCUMENT NUMBER	<b>:</b>	P04000127	1980
The enclosed Articles of A	mendment and fee are su	bmitted for filing.	
Please return all correspond	dence concerning this mat	tter to the following:	
	Che	Name of Contact Person	Ne <i>Y</i>
	Affa	raable Louis	mith Services Inc
	5	Firm/ Company OYA	mith Services Inc Ridge Dr # 158
	,	Coral Sprir	ys FL 33076
•	C>	City/ State and Zip Co	
		rue @ aol.	
	E-mail address: (to be us	sed for future annual repor	t notification)
For further information con	ncerning this matter, pleas	se call:	
Bruce	Launer	at 954	345-5885
Name of Co	ontact Person	Area C	ode & Daytime Telephone Number
Enclosed is a check for the	following amount made p	payable to the Florida Dep	partment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing	Address	Stran	t Addrace

#### 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

## Articles of Amendment to

, ,	Articles of Inco	rporation				
Affordable	Locksm	<del></del>		Inc,	_	
(Name of Corporation as currentl						
	D0400	50/2798	ζ0			
(Document Number			<del></del>		_	
Pursuant to the provisions of section 607.1006, Flo	orida Statutes, this I	lorida Profit C	orporation ado	pts the following	ng amend	dment(s)
A. If amending name, enter the new name of the	e corporation:					
·					The	new
name must be distinguishable and contain the v "Corp.," "Inc.," or Co.," or the designation "Coword" chartered." "professional association," or a	orp," "Inc," or "C	Co". A profess				
B. Enter new principal office address, if applica	able:			直接	_ ವ	
Principal office address <u>MUST BE A STREET A</u>				2.77	ے ہے	
				3 - T	_ <u></u>	<u>η</u>
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C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)				ထု	
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D. If amending the registered agent and/or registered agent and/or the new register			enter the name	e of the		
new registered agent and/or the new register	red office dddress.	•				
Name of New Registered Agent		· · · · ·				
•						
	(Florida stro	eet address)				•
New Registered Office Address:			, Florida			
	(City)	_		(Zip Code)		
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.

Signature of New Registered Agent, if changing

### 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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X_Change	<u>ΡΓ</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)  1) Change	Title	Chery Lawner	Address 5944 Coxal Ridge DX
Add Remove			Sufe # 158  Coral Springs FL 33676  S944 coral Ridge Dr
2)Change .	P	Bruce Lawner	SUHC# 158
Remove 3) Change			Coral Springs PC 338
Add Remove .			
4) Change Add Remove		·	1
5) Change Add Remove		<del>-</del> -	
6) Change Add			
Remove			

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
provisions for implementing the amendment if not contained in the amendment itself:		
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(if not applicable, indicate N/A)	If an amendment provides for an exch	range, reclassification, or cancellation of issued shares.
	provisions for implementing the ame	ndment if not contained in the amendment itself:
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The date of each amendment(s) ad	Joption: July 4,2013
Effective date <u>if applicable</u> :	•
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
☐ The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	proved by the shareholders through voting groups. The following statement 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)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
•	Phenyl Jaune
Signature	Pheral Jaune
(By a d	irector, president or other officer - if directors or officers have not been
	d, by an incorporator – if in the hands of a receiver, trustee, or other court
арроп	ted fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
	Former President
	(Title of person signing)