## 06000131989

(Requestor's Name)	9001624790		
(Address)			
(Address)	0001021700		
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL	11/05/0901025001		
(Business Entity Name)			
(Document Number)			
Certified CopiesCertificates of Status <u>tribus</u>	SECRE ADJUNE ADJ		
Special Instructions to Filing Officer:	ARX		
·	OF STATE		

Office Use Only



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## **COVER LETTER**

TO: Amendment Se Division of Co	ection rporations			
SUBJECT:	Prolock and Saf	e Corporation Corporation		
DOCUMENT NUMB	er:P06	6000131989		
The enclosed Statemen	t of Change of Registered Offi	ce/Agent and fee are subm	itted for filing.	
Please return all corres	pondence concerning this matte	er to the following:		
		-		
		Gonzalez	_	
	Name of C	ontact Person	<del></del>	
		and Safe		
	Firm/C	Company		
	896 SW	70 Avenue		
		dress		
	Miami, f City/State	FL 33144 and Zip Code		
•	estrella@nrolo	ckandeafe com		
estrella@prolockandsafe.com  E-mail address: (to be used for future annual report notification)				
		•	•	
For further information	concerning this matter, please	call;		
	vid Gonzalez	at ( 305 )	365-8539	
Name o	f Contact Person	Area Code & Dayt	ime Telephone Number	
Enclosed is a \$35.00 ch	eck made payable to the Depa	rtment of State.		
·	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment S Division of Co Clifton Buildi 2661 Executiv Tallahassee, F	orporations ng ve Center Circle	

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida State of F	lorida	his 	_
1. The name of the corporation: Prolock and Safe Corporation			
2. The principal office address: 896 SW 70 Avenue, Miami, FL 33144			
3. The mailing address (if different):			
4. Date of incorporation/qualification: 10/16/2006 Document number: P0	60001	3198	9
5. The name and street address of the current registered agent and registered office on file with Florida Department of State: (If resigned, enter resigned)	the		
David Gonzalez, P			
1102 West Flagler Street	SEC	091	
Miami, FL 33130	A T	- VON 60	d g
6. The name and street address of the new registered agent (if changed) and /or registered offic (if changed):	ARY OF	-5 AH 10:	
David Gonzalez, P	NIS VIS	2	
896 SW 70 Avenue	当用	Ġ	
P.O. Box NOT acceptable			
Miami, FL 33144			
The street address of its registered office and the street address of the business office of its as changed will be identical.	•	•	nt,
Such change was authorized by resolution duly adopted by its board of directors or by an o authorized by the board, or the corporation has been notified in writing of the change.	fficer s	0	
Signature of an Officer Selfrector  David Gonzalez, Pre Printed or typed name and title	sident		_
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 comp of my duties, and I am familiar with and accept the obligation of my position as registered document is being filed merely to reflect a change in the registered office address, I hereby corporation has been notified in writing of this change.			nce his he
Signature of Registered Agent  11/2 Jo9 Date			
Signature of Registered Agent Date			_
If signing on behalf of an entity:			
David Gonzalez  Typed or Printed Name			
* * * FILING FEE; \$35.00 * * *			

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