P110000044420

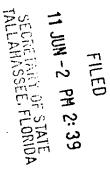
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Amend + N.C. C.COULLIETTE

JUN 0 2 2011

EXAMINER

COVER J. ETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION:	BOB LOCKSMITH, INC		
DOCUMENT NU	MBER:	P11000044420		
The enclosed Artic	les of Amendment and fee a	are submitted for filing.		
Please return all co	rrespondence concerning th	is matter to the following:		
_		GIL LEVI		
		Name of Contact Person		
	ВО	B LOCKSMITH, INC.		
		Firm/ Company		
3116 SOUTH ANDREWS AVE. SUITE A				
•		Address		
	FT. LA	AUDERDALE, FL 33316		
-		City/ State and Zip Code		
	SHNAE18 E-mail address: (to be use	B@BELLSOUTH.NET ed for future annual report notification)		
For further informa	tion concerning this matter.	, please call:		
AF	RLENE SHANE	at (305) 937-2249		
Name	of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check	for the following amount r	made payable to the Florida Department of State:		
☑ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclose		
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		



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 25, 2011

GIL LEVI BOB LOCKSMITH, INC 3116 SOUTH ANDREWS AVE., STE A FT LAUDERDALE, FL 33316

SUBJECT: BOB LOCKSMITH, INC

Ref. Number: P11000044420

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

The date of adoption/authorization of this document must be a date on or prior to submitting the document to this office, and this date must be specifically stated in the document. If you wish to have a future effective date, you must include the date of adoption/authorization and the effective date. The date of adoption/authorization is the date the document was approved.

The document must have original signatures.

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) 245-6903.

Cheryl Coulliette
Regulatory Specialist II

Letter Number: 611A00012935

FECEIVED

11 JUN -2 PH II: 21

SECRETARY OF STATE
ALLAHASSEE, FLORID

Articles of Amendment Articles of Incorporation of

BOB LOCKSMITH, INC (Name of Corporation as currently filed with the Florida Dept. of State) P11000044420

(Document N	umber of Corporation (if known)	
Pursuant to the provisions of section 607.16 umendment(s) to its Articles of Incorporation	006, Florida Statutes, this Florida Profit Corporation adopts the following:	
A. If amending name, enter the new name	Bob Locksmith Inc. The new	
abbreviation "Corp.," "Inc.," or Co.," or t	the word "corporation," "company," or "incorporated" or the he designation "Corp," "Inc," or "Co". A professional corporation rofessional association," or the abbreviation "P.A."	
B. <u>Enter new principal office address, if al</u> (Principal office address <u>MUST BE A STRE</u>		
	FL 33316	
C. Enter new mailing address, if applicab (Muiling address <u>MAY BE A POST OF</u>)		
O. If amending the registered agent and/or new registered agent and/or the new re	r registered office address in Florida, enter the name of the gistered office address:	
Name of New Registered Agent:	GIL LEVI	
New Registered Office Address:	3116 SOUTH ANDREWS AVE. SUITE A (Florida street address)	
	FT. LAUDERDALE Florida 33316 ASE Clip (City) (Zip Code)	
New Registered Agent's Signature, if chan-	ging Registered Agent:	<u> </u>
hereby accept the appointment as registered	(City) (Zip Code) ging Registered Agent: I agent. I am familiar with and accept the obligations of the position.	Ę
	Signorare of New Registered Agent, if changing FLORIDE Signorare 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u> </u>	ANDRES GAVIRIA	3116 SOUTH ANDREWS AVE. SUITE B FT. LAUDERDALE, FL 33316	
<u>P</u>	GIL LEVI	3116 SOUTH ANDREWS AVE. SUITE A FT. LAUDERDALE, FL 33316	☑ Add □ Remove
			☐ Add ☐ Remove
	ling or adding additional Articles, enter Iditional sheets, if necessary). (Be spec		
provisio	nendment provides for an exchange, recons for implementing the amendment if or applicable, indicate N/A)	classification, or cancellation of iss not contained in the amendment i	ued shares, tself:

The date of each amendment(s) adoption: 5-19-11		
Effective date <u>if applicable</u> :	05/17/11 (date of adoption is required)	
Effective date <u>it applicable</u> :	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wee by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.	
	re approved by the shareholders through voting groups. The following statemend 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)	
action was not required.	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder	
Dated Signature (By sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)	
	GIL LEVI (Typed or printed name of person signing)	
	PRESIDENT (Title of person signing)	