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SECRETARY OF STATI
ANASSEE, FLORI

PR 4/30/12

COVER LETTER

Division of Co	orporations					
OVD IT CT	Libort	/ Assets Inc.				
SUBJECT:	Nar	ne of Corporation				
		·				
DOCUMENT NUME	BER:	P11000046325				
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.						
Please return all corres	spondence concerning this	s matter to the following:	·			
	Barbara A Kowal					
	Name of Contact Person					
_	Liberty Assets Inc Firm/Company					
		- иписотрану				
	70	NM 1st Street				
_	70 W. 1st Street Address					
		ridatess				
	And	onka El 22702				
	Apc City/	opka, FL 32703 State and Zip Code				
	City/State and Zip code					
	admin@lil	pertylocksmiths.com				
admin@libertylocksmiths.com E-mail address: (to be used for future annual report notification)						
For further information	n concerning this matter,	please call:				
Bar	bara A Kowal	et (407 ·	620-4152 (cell)			
Name o	of Contact Person	Area Code &	620-4152 (cell) Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Department of State.						
	Mailing Address: Amendment Section	Street A Amendr	ddress: nent Section			

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

CR2E045 (8/05)

ч: : ТО:

Amendment Section

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

statement of cha	provisions of sections 607.0502, 617 ange is submitted for a corporation o er to change its registered office or re	organized under the laws of the Stat	_{e of} Florida	
1. The name of	the corporation: Liberty Assets	s Inc.		
2. The principal	office address: 70 W. 1st Street			
Apopka, F	L 32712			
3. The mailing a	nddress (if different):			
4. Date of incor	poration/qualification: 05/12/2	2011 Document number:	P11000046325	
	d street address of the current register rtment of State: (If resigned, enter res	_	. 964	
	Robert T Kowai		THE PER T	
	70 W. 1st Street		2012 APR 25 TALLAHASS	
	Apopka, FL 32703		SSEE SEE	
6. The name and (if changed):	d street address of the new registered	agent (if changed) and /or registere	SEE.FLORID	
	Robert T Kowal			
	541 N. Park Avenue	•		
		ox NOT acceptable		
	Apopka, FL 32712			
The street addras changed will	ess of its registered office and the st be identical.	treet address of the business office	e of its registered agent,	
Such change w authorized by t	as authorized by resolution duly adhe board, or the corporation has been	opted by its board of directors or len notified in writing of the chang	by an officer so e.	
Taylar Signatu	for an efficer of director	Barbara A Ko	owal, CFO e and title	
l furthér agrêe of my duties, ar document is be	the appointment as registered age to comply with the provisions of all ad I am familiar with and accept the ing filed merely to reflect a change s been notified in writing of this cha	l statutes relative to the proper an e obligation of my position as regi in the registered office address, l	y, d complete performance istered agent. Or, if this hereby confirm that the	
		04/16/2	04/16/2012	
Sign	nature of Registered Agent	Date		
If signing on be	chalf of an entity:			
	Robert T Kowal yped or Printed Name			

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