# P12000077560

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SECRETARY OF STATE
DIVISION OF CORPURATIONS

14 HIM I.C. PM 1: LO

C. LEWIS

JUN 2 7 2014

EXAMMER

### COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: CV	'S LOCKSMITH IN	C
DOCUMENT NUMBER: P1200	00077560	
The enclosed Articles of Amendment		
Please return all correspondence conce	erning this matter to the followi	ng:
Adriana I	Diaz	
	Name of Cont	act Person
Star Taxe	es Inc	
	Firm/ Cor	npany
12912 SV	N 133 CT Suite B	
	Addro	ess
Miami, F		
	City/ State and	1 Zip Code
STAR.TAXE	S @YAHOO.COM	
E-mail add	lress: (to be used for future ann	ual report notification)
For further information concerning thi	s matter, please call:	
CARLOS O SOZA	7	<sup>2</sup> 86 366-2090
Name of Contact Perso		Area Code & Daytime Telephone Number
Enclosed is a check for the following a	amount made payable to the Flo	orida Department of State:
<del>-</del>	Filing Fee & S43.75 Filing te of Status Certified Co (Additional e enclosed)	py Certificate of Status
Mailing Address Amendment Section Division of Corpora P.O. Box 6327 Tallahassee, FL 323	tions	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation of



14 JUN 16 PH 1:40

## CVS LOCKSMITH INC

(Name of Corporation as currently filed with the FP 12000077560	lorida Dept. of State)
(Document Number of Corporation (i	f known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation" ("Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "word "chartered," "professional association," or the abbreviation "	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	3320 SW 104TH AVE
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	MIAMI, FL 33165
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3320 SW 104TH AVE
	MIAMI, FL 33165
D. If amending the registered agent and/or registered office address  Name of New Registered Agent  Name of New Registered Agent	
(Florida str	veet address)
New Registered Office Address: 3320 SW 104TH A	VE, MIAMI FL. Florida 33165
(City)	
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar v  Signature of New Registered 2	vith and accept the obligations of the position.

# 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 <math>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>PT</u>	John Doe				
X Remove	<u>v</u>	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	Name	<u>Address</u>			
1) Change	Р	CARLOS SOZA	3320 SW 104TH AVE			
Add		1	MIAMI, FL 33165			
Remove						
2) Change	VT	VIRGINA SALDANA	3320 SW 104TH AVE			
Add		<u>!</u>	MIAMI, FL 33165			
Remove		•				
3) Change						
Add						
Remove						
4) Change						
Add Add		-				
Remove						
5) Change						
Add						
Remove		-				
δ) L Change		<del>-</del>				
Add		-	_			
Remove						

E. If amend (Attach a	ding or adding adding additional sheets, if	ditional Article `necessary). (	s, enter chang Be specific)	e(s) here:		
					<del> </del>	
						<u> </u>
	· · -					
. <u>-</u>						
			<del></del> -			
			<del></del>		·	
		-				
provisi	nendment provides ons for implement not applicable, ind	ting the amend	ge, reclassific ment if not co	ation, or cance ntained in the	llation of issued amendment itse	shares, lf:
<del>-</del>		<del></del>				
		<u>-</u>				<u>.</u>
	<u> </u>					
				<u> </u>		

The date of each amendment(s) date this document was signed.	adoption: <u>06/07/2014</u>	SECRETARY OF STATE OF	, if other than the
Effective date if applicable:	(en mono them Of	0 days after amendment file date)	<del></del>
	(no more man 9)	) days after amenament file date)	
Adoption of Amendment(s)	( <u>CHECK ONE</u> )		
The amendment(s) was/were acby the shareholders was/were	dopted by the shareholders. The sufficient for approval.	number of votes east for the amendment(s)	
		ough voting groups. The following statement wote separately on the amendment(s):	
"The number of votes cas	st for the amendment(s) was/were	e sufficient for approval	
by	(voting group)	.,	
The amendment(s) was/were action was not required.	lopted by the board of directors	without shareholder action and shareholder	
The amendment(s) was/were acation was not required.	dopted by the incorporators with	out shareholder action and shareholder	
Dated June 0	7/2014		
Signature	42		
select		er – if directors or officers have not been hands of a receiver, trustee, or other court	
	CARLOS O SOZA		
	(Typed or p	rinted name of person signing)	
	President		
	(Tit	le of person signing)	