# P140000 80621

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: KARLOCKED CORP				
	IBER: P14000080627			
	es of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	Michael B. Stevens, Esq.			
	· · ·	Name of Contact Person	)	
	Derrevere Stevens Black & G	Cozad		
		Firm/ Company	<u> </u>	
	2005 Vista Parkway, Suite 2	10		
		Address		
	West Palm Beach, FL 33411			
		City/ State and Zip Code	:	
kle	al@derreverelaw.com			
<del></del>	E-mail address: (to be us	sed for future annual report	notification)	
For further informati	on concerning this matter, pleas	se call:		
Michael B. Stevens,	Esq.	at (	684-3222	
Name of Contact Person		Area Co	/ de & Daytime Telephone Number	
Enclosed is a check	for the following amount made	payable to the Florida Depa	rtment 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)	
	ailing Address		Address	
Amendment Section		Amendment Section		
	vision of Corporations  O. Box 6327		n of Corporations Building	
	Ilahassee, FL 32314		xecutive Center Circle	

Tallahassee, FL 32301

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

#### KARLOCKED CORP

### (Name of Corporation as currently filed with the Florida Dept. of State)

P14000080627

(Document Number of Corporation (if known)

ent(s) ta

its Articles of Incorporation;		
A. If amending name, enter the new name of the con	rporation:	
		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association." or the designation of the contained association.	" "Inc." or "Co". A profe	v." or "incorporated" or the abbreviation
B. Enter new principal office address, if applicable:	<u>.</u>	
(Principal office address MUST BE A STREET ADD	RESS )	
	<del></del>	
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>	
	<del></del>	
D. If amonding the special section 1		
<ul> <li>If amending the registered agent and/or registered new registered agent and/or the new registered or</li> </ul>	ed office address in Florida Mice address:	<u>, enter the name of the</u>
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		Mari I.
- Control of Office Parties.	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. 1	stered Agent: am familiar with and accent	the obligations of the position
	and and accept	the congations of the position.
Signat	ure of New Registered Agen	t. if changing

Page 1 of 4

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>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
i) Change	Other	Farid Lopez	2005 Vista Parkway, Suite 210	
Add			West Palm Beach, FL 33411	
X Remove				
2) Change		_		
Add				
Remove				
3 ) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

Attach additional sheets, if necessary).	<u>cles, enter change(s) ho</u> (Be specific)	_		
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<u>provisions for implementing the amer</u>	dment if not contained	m me amendment	itseir.	
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	May 3, 2019	
The date of each amendmen date this document was signed		if other than the
Effective date if applicable:	May 3, 2019	
	(no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory filing requirements, this date will no the Department of State's records.	ot be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/wer by the shareholders was/we	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.	i
☐ The amendment(s) was/wer must be separately provide	are approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	re adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated	May 13, 2019	
Signature	Edgard Solano Edgard Solono (May 13, 2019)	
(B se	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, Fustee, or other court oppointed fiduciary by that fiduciary)	
	Edgard Solano	
	(Typed or printed name of person signing)	<u> </u>
	President	
	(Title of person signing)	<del></del>