P15000 006 100

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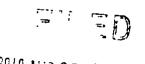
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	PORATION: NAPLES ADVA	NCED LOCKSMITH, INC.		
DOCUMENT NU	P15000006100			
The enclosed Artic	les of Amendment and fee are su	abmitted for filing.		
Please return all co	rrespondence concerning this ma	atter to the following:		
	ĐAVID LANIEWSKI			
		Name of Contact Person	n	
		Firm/ Company		
	1900 49TH ST SW			
		Address		
	NAPLES, FL 34116			
		City/ State and Zip Cod	e	
n7	lima@aol.com			
	E-mail address: (to be u	sed for future annual report	notification)	
For further informa	tion concerning this matter, plea	se call:		
DAVID LANIEWSKI		at (253-1148	
Name of Contact Person		Area Code & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address		Street Address		
·	Amendment Section	Amendment Section		
Division of Corporations		Division of Corporations Clifton Building		
P.O. Box 6327 Tallahassee, FL 32314		2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



NAPLES ADVANCED LOCKSMITH, INC.

2019 AIT 23 PH 2: 26

(<u>Name</u> (of Corporation as currently	filed with the Florida	Dept. of State)
P15000006100			•
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this I	Florida Profit Corporat	ion adopts the following amendment(s)
A. If amending name, enter the new na	ime of the corporation:		
name must he distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "C	Co". A professional co	
B. Enter new principal office address,	if applicable:		
(Principal office address MUST BE A S			
		*	
C. Enter new mailing address, if appli			
(Mailing address <u>MAY BE A POST</u>)	OFFICE B <u>OX</u>)		
			
D. If amending the registered agent an	d/or registered office addr	ess in Florida, enter th	e name of the
new registered agent and/or the new			<u></u>
Name of New Registered Agent	BRITTANY CORDERO		
	1900 49TH ST SW		
	(Florida stre	ret address)	
New Registered Office Address:	NAPLES		Florida 34116
		(City)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		ith and accept the oblig	gations of the position.
	B. Core		
	Signature of New Re	egistered Agent, if chan	ging

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	BRITTANY CORDERO	1900 49TH ST SW
X Add			NAPLES, FL 34116
Remove			
2) Change	·		
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ry). (Be specific)	
		
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If an amendment provides for an e	exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the a	exchange, reclassification, or cancellation of issued shares, amendment if not contained in the amendment itself:	
If an amendment provides for an eprovisions for implementing the a	amendment if not contained in the amendment itself:	
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provisions for implementing the a	amendment if not contained in the amendment itself:	

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date	
	(no more than 90 days after amendment file date	·)
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirement operatment of State's records.	ts, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes east for the am ufficient for approval.	endment(s)
	proved by the shareholders through voting groups. The following reach voting group entitled to vote separately on the amendme	
	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	lopted by the board of directors without shareholder action and s	shareholder
The amendment(s) was/were action was not required.	lopted by the incorporators without shareholder action and share	holder
8/19/2019		
Dated		
Simular A.		
Signature ABy a	director, president or other officer - if directors or officers have	not been
select	ed, by an incorporator if in the hands of a receiver, trustee, or	
appoi	nted fiduciary by that fiduciary)	
	DAVID LANIEWSKI	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

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