P180000 66500

(Requestor's Name	e)
(Address)	
(Address)	
(City/State/Zip/Pho	one #)
PICK-UP WAIT	MAIL
(Business Entity N	ame)
(Document Numbe	er)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	770 Loc	ksmiths Inc			
DOCUMENT NUMBER: P18000066500					
The enclosed Articles of Amendmen	u and fee are su	ibmitted for filing	; ,		
Please return all correspondence con	cerning this ma	tter to the follow	ing:		
	Oren N Ovaya	a			
		Name of Con	tact Persor	1	
		Firm/ Co	mpany		
	5168 Conroy	Rd - Apt 1614			
		Addr	ess		
	Orlando, FL	32811			
		City/ State and	d Zip Code	e	
	770locksmith	ns@gmail.com			
E-mail ac	ddress: (to be u	sed for future ann	ual report	notification)	
For further information concerning the	his matter, pleas	se call:			
Oren N Ovadya		at (_	.07	952-7793	
Name of Contact Per	son		Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following	g amount made	payable to the Flo	orida Depa	irtment of State:	
	Filing Fee & cate of Status	S43.75 Filin Certified Co (Additional c enclosed)	- py	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			Amend Divisio Clifton	Address ment Section of Corporations Building xecutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

770 Locksmiths Inc

(Name of C	Corporation as currently	filed with the Florida Dept. of State	<u>:</u>)		
P18000066500					
	(Document Number of	Corporation (if known)			
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	06, Florida Statutes, this F	lorida Profit Corporation adopts the	following ame	ndme	ent(s) to
A. If amending name, enter the new name	of the corporation:				
		2 0 0 0 0		new	
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association	m "Corp." "Inc." or "C	o". A professional corporation nam			
B. Enter new principal office address, if a	pplicable:	5168 Conroy Rd Apt 1614			
(Principal office address MUST BE A STREET ADDRESS)		Orlando FL 32811	,	,	
				10	-17
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		5168 Conroy Rd Apt 1614		<u> </u>	にいっ
(muning underest Marie De 711 Our Or 1	TCL M/M	Orlando, FL 32811	د	<u>۔</u>	
			1.5	Ç.)	
			* - · · · · · · · · · · · · · · · · · ·		
D. If amending the registered agent and/o		ss in Florida, enter the name of the			
new registered agent and/or the new re	egistered office address:				
Name of New Registered Agent	Oren N Ovadya				
	5168 Conroy Rd Apt	1614			
	(Florida stree	t address)			
New Registered Office Address:	Orlando	. Florida			
	/(Tity)	(Zip Code)	_	
New Registered Agent's Signature, if chan I hereby accept the appointment as registered		th and accept the obligations of the po	osition.		
_ ske~	OV ADVA	gistered Agent, if changing			
	Signature of New Re	gistered Agent, if changing			
	у				

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	P	Shlomi Yefet	4988 Millennia Green Dr
Adđ			Orlando, FL 32811
Remove			
2) X Change	P	Oren N Ovadya	5168 Conroy Rd Apt 1614
Add			Orlando, FL 32811
Remove			
3)Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	.			
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· ·					
					
					
				••	
· · ·			-		
				 	
	<u> </u>				
f an amendment provides for an exch	ange, reclassifica	tion, or cancella	tion of issued s	hares	
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not con	tained in the am	endment itself	<u>:</u>	
у на аррисате, такие голу					
	<u>.</u>			 -	
<u></u>	<u> </u>			•	
				· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
(no more than 90 days after amenament fue date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date widocument's effective date on the Department of State's records.	ll not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Signature ORCY OVADYA TO 0.0	
(By a director, president or other efficer – if directors or officers have not been selected, by an incorporator – it is the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Oren N Ovadya	
(Typed or printed name of person signing)	
President	
(Title of person signing)	