P190000 14249

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Amend

MAY 2.1 2019 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: LOCKSMITH 4 YOU INC DOCUMENT NUMBER: P19000014249 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: YOSSI ATTIAS Name of Contact Person Firm/ Company 7780 KENWAY PLACE WEST Address **BOCA RATON.FLORIDA 33334** City/ State and Zip Code MVOGEL777@BELLSOUTH.NET E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (561) 305-4475

Area Code & Daytime Telephone Number YOSSLATTIAS Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee ☐\$43.75 Filing Fee & \$35 Filing Fee ☐\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Street Address Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

LOCKSMITH 4 YOU INC	on as currently filed with the Florida Dept. of State)
P19000014249	
	ent Number of Corporation (if known)
Pursuant to the provisions of section 607,1006. Florida ts Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s
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 o	d "corporation," "company," or "incorporated" or the abbreviation ""Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. <u>Enter new principal office address, if applicable</u> Principal office address <u>MUST BE A STREET ADD</u>	<u>PRESS</u>)
	2[
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO.	<u>X</u>)
D. If amending the registered agent and/or register new registered agent and/or the new registered	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zîp Code)
New Registered Agent's Signature, if changing Reg	vistered Agent:
I hereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the position.
Cian	vature of New Registered Agent if changing

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 Doc 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	PT	John Doc			
X Remove	<u>V</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	Name	Address		
1) X Change	∇P	NISSIN HAVIV	2298 NE 2ND AVE		
Add			BOCA RATON,FLORIDA 33431		
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)	rticles, enter chango). (Be specific)			
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f an amendment provides for an ex	xchange, reclassifica	ation, or cancellation	on of issued shares.	ı.
provisions for implementing the at (if not applicable, indicate N/A)	<u>menament ij not çol</u>)	ntained in the amer	idinent usen.	
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		<u> </u>		

The date of each amendment(s)	adoption:, if other	than the
late this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will not be liste Department of State's records.	ed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
☐ The amendment(s) was/were a must be separately provided j	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes co	ast for the amendment(s) was/were sufficient for approval	
by	."	
· · · · · · · · · · · · · · · · · · ·	(voting group)	
☐ The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(*) was*were a action was not required.	adopted by the incorporators without shareholder action and shareholder	
Dated	5/7/2019	
Signature <u>/</u>	120	
sele	edirector, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)	
	YOSSI ATTIAS	
	(Typed or printed name of person signing)	•
	PRESIDENT	
	(Title of person signing)	-