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Office Use Only



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Amend Changing

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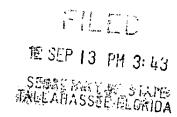
T. LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Guard Dog, Inc.	
Nam	e of Corporation
DOCUMENT NUMBER: F10000001246	<u> </u>
The enclosed Affidavit by Foreign Corporation is submitted for filing.	to Change/Add Officer(s) and/or Director(s) and fee are
Please return all correspondence concerning this	matter to the following:
Shawn Carey Name of Contact Person	
Name of Contact Person	
Guard Dog, Inc.	<u>.</u>
Firm/Company	
2431 Aloma Ave. Suite #124	
Address	
Winter Park, FL 32792	
City/State and Zip Code	
shawn@guarddogincorporated.co	
E-mail address: (to be used for future annual rep	ort notification)
For further information concerning this matter, p	lease call:
Shawn Carey at (321 527-8371 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check made payable to the Florida	Department of State for the following amount:
✓ \$35.00 Filing Fee Substituting Fee Substitution Fee Substituting Fee Substitution Fee Substituting Fee Substitution Fee Su	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle
,	Tallahassee, FL 32301

CR2E127 (10/11)





FLORIDA DEPARTMENT OF STATE **DIVISION OF CORPORATIONS**

AFFIDAVIT BY FOREIGN CORPORATION TO CHANGE/ADD OFFICER(S) **AND/OR DIRECTOR(S)**

 The name of the foreign corporat Guard Dog, Inc. 	tion as it appears on the records of the Florida Department of State is:
	nsact business in Florida on 03/11/2010 and its Florida document
3. This corporation was formed und	ler the laws of Nevada
4. The name and address of each of	fficer and/or director is as follows:
Title: President	Name and Address Shawn Carey
	1941 Mitchellbrook Ln.
	Casselberry, FL 32707
<u></u>	
1 .	
(Atta	ach additional pages if necessary)
	President
mature of an officer or director	Title of person signing
vn Carey ed or printed name of person signing	FILING FEE \$35 Make checks payable to Florida Department of State and Mail to:
ed or printed name of person signing	Division of Corporations PO Box 6327 Tallahassee, FL 32314

Typed or printed name of person signing

CR2E127 (10/11)