LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)

4/1

FILED
May 17, 2004 8:00 am
Secretary of State
04-12-2004 90029 041 ****50.00

DOCUMENT # L01000009163

1. Entity Name

Guardian Holdings I, LLC

DO NOT WRITE IN THIS SPACE

34006297

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
875 Concourse Parkway S	SAME
Suite, Apt. #, etc.: Suite 150	Suite, Apt. #, etc.:
City & State: Maitland, FL	City & State:
Zip: 32751 Country: US	Zip: Country:

4. FEI Number — ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Thomas R. Burns, Esq

Street Address (P.O. Box Number is Not Acceptable): 875 Concourse Pkwy S

Suite 150

City: Maitland FL Zip Code: 32751

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Thomas R. Burns 3/16/04
Signature, typed or printed name of registered agent and title if applicable. DATE

FEE IS $50.00
Make Check Payable to Florida Department of State
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Mgr Guardian Equities, Inc. 7200 Lake Ellenor Drive Orlando, FL 32809
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MANAGING Member Member Alan H. Ginsburg 875 Concourse Parkway S, Suite 150 Maitland, FL 32751
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~Member~~ ~~Louis Shassian~~ 7200 Lake Ellenor Drive Orlando, FL 32809
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~Member~~ ~~Louise Shassian~~ 7200 Lake Ellenor Drive Orlando, FL 32809
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Member ~~Michael J. Sciarrino Revocable Trust~~ ~~1551 Sandapus Road~~ Maitland, FL 32751
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CR2E083B (12/02)

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: [signature] 3/10/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date

Alan H. Ginsburg, Mgr.
Daytime Phone #