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COVER LETTER

TO: Registration Secti Division of Corpo					
SUBJECT: GUA	RDIAIUS HIP Name of Limi	SERVICES, 4 ited Liability Company	۷		
The enclosed Articles of An	nendment and fee(s) are sub	mitted for filing.			
Please return all correspond	ence concerning this matter	to the following:			
	HA	PRRY J. PAR	2/5		
	<u></u>	ARDIANSHIP SE	ERUICES, C	(((
	770	07 GROUES RO	PAP	201 1 A 1	
	N	APLES, FL 3	4109	2015 HAY 26 DATE AHASSE	(300c)
	My yor k E-mylil address: (1	Address April S FC 3 City/State and Zip Code 10 9 8 yahoo. Co to be used for future/annual report notifical:	2 M cation)	6 PH 2: 32 SEE FLORID	
For further information con-	cerning this matter, please ca	ail:		2: 32 18:10 18:10 18:10	\$
HARRY Name of P	J. PARICS	at (239) 57/- Area Code Daytime	- 4/2 / Telephone Number		
Enclosed is a check for the	following amount:				
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

GUARDIANSHIP SI	ERUICES, LAC
GUARDIANSHIP SE (Name of the Limited Liability Compar (A Florida Limited Li	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L03000 K7483</u> . This amendment is submitted to amend the following:	were filed on $\frac{11/20/03}{}$ and assigned
Ť	
A. If amending name, enter the new name of the limited liabi HOME WATCH & CONCIERG	F SERVICES OF NAPLES LLC
The new name must be distinguishable and contain the words "Limited Liability	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	7707 BROVES ROAD
(Principal office address MUST BE A STREET ADDRESS)	NAPLES, FL 347092
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6 PH 2: 32
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	
Name of New Registered Agent:	0)/2
New Registered Office Address:	Enter Florida street address
	Florida
	City , Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent:	

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member **Title** Name | **Address** Type of Action DAWN A. PARKS MGR 7707 GROVES ROAD XAdd NAPLES, FL 34/09 | Remove ☐ Change MER HARRY J. PARKS 7707 GROVES ROAD XADD NAPLES, FL 34/09 PREMOVE ☐ Change □ Add ☐ Remove ☐ Change Remove ∵□ Change, □ Add ☐ Remove _□ Change □ Add ☐ Remove _□ Change

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Typed or printed name of signee

Filing Fee: \$25.00