## #L/00005/302

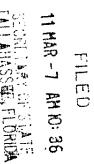
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:  ADDED EIN # PER CONVERSATION  WITH HEATHER NEUSON 3/8/2011  KS

Office Use Only



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02/22/11--01020--016 \*\*25.00



K. SALY EXAMINER MAR 8 2011



February 23, 2011

GUARDIAN C/O HEATHER L NELSON 13400 SUTTON PARK DR. SOUTH, STE. 1001 JACKSONVILLE, FL 32224

SUBJECT: GUARDIAN PROPERTIES, LLC

Ref. Number: L10000051302

We have received your document for GUARDIAN PROPERTIES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly Regulatory Specialist II

Letter Number: 611A00004538

## **COVER LETTER**

Registration Section

Tallahassee, FL 32314

SUBJECT:	Guardian	Properties, LLC			
	Name of Lim	ited Liability Company	···		
The enclosed Articles of An	nendment and fee(s) are sul	omitted for filing.			
Please return all correspond	ence concerning this matter	to the following:			
,	Heather L´Nelson				
		Name of Person			
		Guardian Firm/Company			
		TimeCompany			
13400 Sutton Park Drive South Ste 1001					
		Address			
	J;	acksonville, FL 3222	24		
		City/State and Zip Code			
	hne	elson@guardiantti.co	om		
For further information cond	·		epon nouncation)		
	er L Nelson	at (_904_)	992-1162 x 101		
Name of Pe	erson	Area Code & Daytime Telephone Number			
Enclosed is a check for the f	ollowing amount:				
\$25:00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is	Certificate of Status &		
MAILING Registratio	G ADDRESS: on Section		C/COURIER ADDRESS:		
Division of Corporations P.O. Box 6327		Division o Clifton Bu	of Corporations uilding		

2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 11 MAR -7 AM 10: 36

Qua (Name of the Limited Lie	rdian Properties, LLC	[ALL All	ANY OF STATE	
(A Flo	bility Company as it now appear orida Limited Liability Company)	s on our records.)	TOUILM	
The Articles of Organization for this Limited Liabi Florida document number L1000005130	• •	05/12/2010	and assigned	
riorida document namen	•	•		
This amendment is submitted to amend the following	ng:	,		
A. If amending name, enter the new name of the	e limited liability company her	<u>e</u> :		
Pas	sion Power Yoga, LLC			
The new name must be distinguishable and end with th "L.L.C."	e words "Limited Liability Compa	ny," the designation "Ll	C" or the abbreviation	
Enter new principal offices address, if applicable	<u> </u>			
(Principal office address MUST BE A STREET A	DDRESS)			
			<del></del>	
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BO.	<u></u>			
B. If amending the registered agent and/or registered agent and/or the new registered office		ur records, <u>enter th</u>	e name of the new	
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
_		, Florida		
	City		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 608, 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Jason H Nelson	4807 Long Bow Road  Jacksonville FL 32211	Add _ ✓ Remove
MGRM	Linda J Nelson	500 Sugar Grove Place Orange Park FL 32073	Add Remove
			Add Remove
			Add Remove
	_ <del>_</del>		Add Remove
	<u> </u>		Add Remove
	ling any other information, enter c	hange(s) here: (Attach additional sheets, if necessary.)	_
  Dated	February 17	2011	<del>-</del>
	Signature of a me	ember or authorized representative of a member  Heather L Nelson	
	ı	yped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00