

L10000126952

(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:

Office Use Only



600201615056

04/14/11--01007--026 **30.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 APR 14 AM 8:18

B. KOHR
APR 26 2011
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AmeriGuard Accounting Services, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christopher Pinnick

Name of Person

AmeriGuard Financial Law Center, LLC

Firm/Company

Post Office Box 551028

Address

Jacksonville, Florida 32255

City/State and Zip Code

cpinnick@ameriguardslaw.com

E-mail address: (to be used for future annual report notification)

FILED STATE
SECRETARY OF CORPORATIONS
11 APR 14 AM 8:18

For further information concerning this matter, please call:

Christopher Pinnick

Name of Person

at (904)

655-0374

Area Code & Daytime 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)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: AmeriGuard Accountig Services, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christopher Pinnick

Name of Person

AmeriGuard Financial Law Center, LLC

Firm/Company

220 Ponte Vedra Park Drive Suite 270

Address

Ponte Vedra Beach, Florida 32082

City/State and Zip Code

cpinnick@ameriguardlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christopher Pinnick

Name of Person

at (904)

655-0374

Area Code & Daytime 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)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 APR 14 AM 8:18

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

AmeriGuard Accounting Services, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 12/10/2010 and assigned
Florida document number L10000126952

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

220 Ponte Vedra Park Drive

Suite 270

Ponte Vedra Beach, Florida 32082

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Post Office Box 551028

Jacksonville, Florida 32255

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Christopher Pinnick

New Registered Office Address:

403 15th Avenue South

Enter Florida street address

Jacksonville Beach

, Florida

32250

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.

Christopher Pinnick
If Changing Registered Agent, Signature of New Registered Agent

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

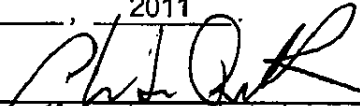
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	AmeriGuard, LLC	7948 Baymeadows Way Suite 300 Jacksonville, Florida 32256	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	AmeriGuard Financial Law Center, LLC	Post Office Box 551028 Jacksonville, Florida 32255	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Pinnick, Christopher	7948 Baymeadows Way Suite 300 Jacksonville, Florida 32256	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Please add our EIN to the file please. The EIN is 27-4214965.

Dated April 19, 2011


Signature of a member or authorized representative of a member

Christopher Pinnick

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00