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EXAMINER

COVER LETTER

TO:	Registration S Division of Co				
SUBJECT: AmeriGuard Financial Law Center, LLC					
D0 D 0			ited Liability Company		
The en	iclosed Articles of	Amendment and fee(s) are sul	bmitted for filing.		
Please	return all corresp	ondence 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)				
_ ^			·	cation)	
For fur	ther information o	oncerning this matter, please o	all:		
Christopher Pinnick				855-0374	
	Name o	f Person	Area Code & Daytime	Telephone Number	
Enclose	ed is a check for the	ne following amount:			
	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Shows a serious of Status & 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

888-484-7703

To: 18502456030

Page 6 of 12

Ameriguard Financial Law Center, LLC
220 Ponte Vedra Park Drive Suite 270
Ponte Vedra Beach, Florida 32082

April 19, 2011

Re: Principal Office Address Update

Please update AmeriGuard Financial Law Center, LLC address to

Ameriguard Financial Law Center, LLC

220 Ponte Vedra Park Drive, Suite 270

Ponte Vedra Beach, Florida 32082

Signature of authorized representative

<u>Christopher Pinnick</u> Printed Name of signee