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COVER LETTER

TO:

Registration Section

Division of Corporations

SUBJECT: GUARDIAN AMFRICAN RESIDENTAGE ASSET HOLGINES 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:

ROBERT W. JOHNS
Name of Person

GUARDIAN AMERICAN RES.
Firm/Company

DAKLAND PARK Address

LAVOFROAUS, FL City/State and Zip Code

ADMIN & GVARAIAN AMERICAN. COM E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Person

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

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

ed Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Con-	ıpany were filed on	09.15-11	and assigned	
Florida document number <u>L/1000/0 4908</u> .			•	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	d liability company here	<u>;</u> :		
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Compar	ny," the designation "LL	C" or the abbreviation	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRES	<u>SS)</u>	43	יהו	
			<u> </u>	
			H M	
T			S 2	
Enter new mailing address, if applicable:		(2)	<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)				
	**************************************		- N	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		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 A	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 Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MOR. M	ROBERT W. JOHNS	1400 E. OAKLAND PARK BLUD	Add
		SUITE # 202	Remove
		FT. LAUDEROGIE, FL 33334	
MGR·M	ROBERT D. KRIEFF	1400. E. DAKIANO PARK BLUD	Add
		SUITE # 202	Remove
		FT. LANGEROALE, FL 33334	_
46R	RJ INVESTMENT SERVICES, LLC	1900 DE 16TH TERRACE	Add
	20101000,200	FORT LADGERANE, FL 33305	Remove
MGR RDK DEVELOPMENT ENTER PRI SES, INC	303 INNER HARBOUR WROO	Æ ✓ Add	
	enter in des, and	TAMPA , FC 33602-5970	Remove
			FP 2
	AND COLUMN TO THE PARTY OF THE		Add
		SEIN SEIN	Remove
			Add
			Remove

). Цап	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	,
ated _	SEPTEMBER 17 2013
	Signature of a member or authorized representative of a member
	ROBERT W. JOHN S Typed or printed name of signee
	Dags 2 of 2

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Filing Fee: \$25.00

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