## 1/3000/(02099

(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	<del>e</del> #)
PICK-UP	☐ WAIT	MAIL
(Bc	usiness Entity Nar	ne)
(Dx	ocument Number)	
Certified Copies	_ Certificates	s of Status
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Office Use Only



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## **COVER LETTER**

	gistration Sec vision of Corp			
SUBJECT:		efense LLC		
SOME C.		Name of Lim	ited Liability Company	
The enclosed	d Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please returr	all correspor	idence concerning this matter	to the following:	
		Taylor Smith		
			Name of Person	
		Guardian Defense LLC		
			Firm/Company	<del></del>
		1279 W. Palmetto Park Rd	. #273155	
		Boca Raton, FL 33427	Address	
		taylor@guardiandefensepla	City/State and Zip Code n.com	
		E-mail address: (	to be used for future annual report notific	cation)
For further i	nformation co	oncerning this matter, please ca	all:	
Taylor Smit	th		954 654-8912 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a	a check for the	e following amount:		
□ \$25.00 F	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

Guardian Defense LLC		
(Name of the Lim	ited Liability Company as it now appe (A Florida Limited Liability Company)	ars on our records.)
The Articles of Organization for this Limited I Florida document number L13000162099	Liability Company were filed on $\frac{1}{2}$	1/19/2013 and assigned
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability company l	nere:
The new name must be distinguishable and contain the	words "Limited Liability Company," the	
Enter new principal offices address, if appli	cable:	हैं
(Principal office address MUST BE A STRE	·	2
The space of the state of the s		P3
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<u> </u>	
B. If amending the registered agent and registered agent and/or the new registered of		n our records, enter the name of the no
Name of New Registered Agent:	Taylor L. Smith	
New Registered Office Address:	1279 W. Palmetto Park Rd. #	273155
rea registered office radiess.	Enter Fl	orida street address
	Boca Raton	Florida 33427
	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 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

<u>Title</u>	<u>Name</u> Jeffrey Rodriguez	Address	Type of Action
MGRM			
		1279 W. Palmetto Park Rd #273155 Boca Raton, FL 33427	_ ■ Remove
			☐ Change
			Add
			Remove
			☐ Change
			Add
			Remove
			Change
			Remove
			□ Change
			DAdd
			□ Remove
			☐ Change
<del></del>			Add
			Remove

Authorized Person. Thank you kindly.    Authorized Person. Thank you kindly.		pleted the form properly. Jeffrey Rodriguez	z is no longer a partner
10/9/18  Effective date, if other than the date of filing:	in our business, so I want to make	sure that he is removed as the Registered	Agent, as well as an
Interview date, if other than the date of filing:  In effective date, if other than the date of filing:  In effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 Sote:  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed slocument's effective date on the Department of State's records.  The specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier the 90th day after the record is filed.  The specifies a delayed of specifies and cannot be prior to date of filing or more than 90 days after will not be listed and cannot be prior to date of filing or more than 90 days after will not be listed and cannot be prior to date of filing or more than 90 days after will not be listed and cannot be prior to date of filing or more than 90 days after will not be listed and cannot be prior to date of filing or more than 90 days after will not be listed and cannot be prior to date of filing or more than 90 days after will not be listed and cannot be prior to date of filing or more than 90 days after will not be listed and cannot be prior to date of filing or more than 90 days after will not be listed and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 days after filing.) Pursuant to 605.02 days after filing or more than 90 days after filing.) Pursuant to 605.02 days after filing.) Pursuant to 605.02 days after filing.) Pursuant to 605.02 days after filing.	Authorized Person. Thank you kind	dly.	
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Signature of a member or authorized representative of a member	e record specifies a delayed eff The 90th day after the record October 9	is filed.	ime, at 12:01 a.m. on the earlier o
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Filing Fee: \$25.00