

L150000006895

(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:

Rec 12/10/14

Office Use Only



400266903504

01/05/15--01004--015 \*\*130.00

Effective Date

1/1/15

FILED  
15 JAN -2 AM 11:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JAN -5 2015

T. HAMPTON

NO \$

7556410

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Guardian Protective Services

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

James K. Buckland, Jr.

Name of Person

Guardian Protective Services

Firm/Company

285 Uptown Blvd., Unit 108

Address

Altamonte Springs, FL 32701

City/State and Zip Code

jkbuckland@gmail.com

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

For further information concerning this matter, please call:

James K. Buckland, Jr. at ( 407 ) 687-5186

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☒ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$160.00 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

RECEIVED  
14 DEC 10 AM 10:00  
DIVISION OF CORPORATIONS  
BUREAU OF COMMERCIAL  
INFORMATION SERVICES

NO \$



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

15 JAN -2 AM 10:00

DIVISION OF CORPORATIONS  
BUREAU OF COMMERCIAL  
INFORMATION SERVICES

December 19, 2014

JAMES K BUCKLAND JR  
285 UPTOWN BLVD  
UNIT 108  
ALTAMONTE SPRINGS, FL 32701

SUBJECT: GUARDIAN PROTECTIVE SERVICES, LLC  
Ref. Number: W14000075498

We have received your document for GUARDIAN PROTECTIVE SERVICES, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$130.00.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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) 245-6051.

Tammy Hampton  
Regulatory Specialist III

Letter Number: 314A00026918

Effective Date

1/1/15

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Guardian Protective Services, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

285 Uptown Blvd., Unit 108

Altamonte Springs, FL 32701

285 Uptown Blvd., Unit 108

Altamonte Springs, FL 32701

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Dreamy Cakes Gourmet Cupcakery, LLC

Name

285 Uptown Blvd., Unit 108

Florida street address (P.O. Box **NOT** acceptable)

Altamonte Springs

City

FL 32701

Zip

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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..*

Angel Buclos Ag.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

FILED  
15 JAN -2 AM 11:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

Owner/Manager

**Name and Address:**

James K. Buckland, Jr.

285 Uptown Blvd., Unit 108

Altamonte Springs, FL 32701

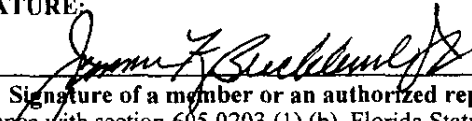
(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 01/01/2015 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE:**

  
Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

JAMES K. BUCKLAND JR.

Typed or printed name of signee

**Filing Fees:**

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

**FILED**  
15 JAN -2 AM 11:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA