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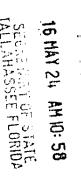
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COVER LETTER

Div	Division of Corporations							
SUBJECT:	GUARDIAN AUTOMATION AND SECURITY LLC							
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:								
	Julia Greenberg-Aguilar							
	Name of Person							
Ī	MyUSAcorporation.com							
_	Firm/Company							
_	l Radisson Plaza, Suite 800							
	Address							
1	New Rochelle, NY 10801-5769							
_	City/State and Zip Code							
E-mail address: (to be used for future annual report notification)								
For further inf	formation concerning this matter, please call:							
Jı	ulia Greenberg-Aguilar 877 330-2677							
	Name of Person Area Code Daytime Telephone Number							
Enclosed is a	check for the following amount:							
\$125.00 Fili	S130.00 Filing Fee & Certificate of Status Certificate of Status (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)							
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building							

Tallahassee, FL 32314

TO:

Registration Section

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

(Must end	with the words "Limited	Liability Compar	y, "L.L.C.," or "LLC.")	
ICLE II - Address: nailing address and street a	address of the principal of	fice of the Limite	d Liability Company is:	
<u>Princi</u>	Principal Office Address:		Mailing Address:	
1101 Brickell Ave,	Ste G0 #310367	. 119	01 Brickell Ave, Ste G0 #310367	
Miami, FL 33231			ami, FL 33231	
mited Liability Compan business entity with an	active Florida registration	& Registered Ag Registered Agent		
mited Liability Compan business entity with an	y cannot serve as its own I active Florida registration address of the registered	& Registered Ag Registered Agent	ent's Signature:	
imited Liability Compan business entity with an	y cannot serve as its own I active Florida registration	& Registered Ag Registered Agent	ent's Signature: You must designate an individual or	
mited Liability Compan business entity with an	y cannot serve as its own I active Florida registration address of the registered	& Registered Ag Registered Agent a.) agent are:	ent's Signature: You must designate an individual or	
mited Liability Compan business entity with an	y cannot serve as its own I active Florida registration address of the registered and the Incorp Services, Inc	& Registered Ag Registered Agent a.) agent are: Name	ent's Signature: You must designate an individual or	
mited Liability Compan business entity with an	y cannot serve as its own I active Florida registration address of the registered and Incorp Services, Inc. 17888 67th Court Nor	& Registered Ag Registered Agent a.) agent are: Name	You must designate an individual or	

(CONTINUED)

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..

Page 1 of 2

Title: "AMBR" = Authorize	d Mamhan	Name and Address:	
"MGR" = Manager	u Member		
AMBR	<u></u>	Rodney England	_
		10 Gosse's Road	
		Paradise, Newfoundland, Canada A1L3P3	-
	_		_
			-
	· ···		_
			-
	_		-
			-
/III			
(Use attachment if nec	• /	(OPTIONAL)	
CLE V: Effective date, if effective date is listed, the of filing.) If the date inserted in the	Other than the date of filing the date must be specific and is block does not meet the	g: (OPTIONAL) and cannot be more than five business days prior to or applicable statutory filing requirements, this date will r	·
CLE V: Effective date, if effective date is listed, the e of filing.) If the date inserted in the cument's effective date of	Tother than the date of filing the date must be specific and is block does not meet the on the Department of State	and cannot be more than five business days prior to or applicable statutory filing requirements, this date will r	·
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CLE V: Effective date, if effective date is listed, the of filing.) If the date inserted in the cument's effective date of the cument's effective date.	TURE:	applicable statutory filing requirements, this date will reserved.	16 HAY 24 AM
CLE V: Effective date, if effective date is listed, the e of filing.) If the date inserted in the cument's effective date of CLE VI: Other provisions REQUIRED SIGNA This column are as a second column.	other than the date of filing the date must be specific and is block does not meet the on the Department of State s, if any. TURE: Signature of a member of document is executed in activate that any false inform	applicable statutory filing requirements, this date will reserved.	16 HAY 24 AH 10: 5

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

SPECIAL AND REVOCABLE LIMITED POWER OF ATTORNEY

TO ALL PERSONS, be it known, that INCORP SERVICES, INC., a Nevada corporation ("<u>Grantor</u>"), does hereby make and grant a limited and specific power of attorney to Anthony Morales and appoint and constitute said individual as my attorney-in-fact ("<u>Attorney-in-Fact</u>"). This Special and Revocable Limited Power of Attorney hereby revokes any and all former powers of attorney given to Attorney-in-Fact.

Attorney-in-Fact shall have the limited power and authority to undertake, commit and perform only the following acts on Grantor's behalf to the same extent as if Grantor had done so personally, all with full power of substitution and revocation in the presence:

Authority to accept appointment as registered agent on behalf of Grantor, for entities which *Selene Enterprises LLC, a Nevada corporation dba MyUSA corporation.com has purchased resident agent service on through their account with Grantor.

TERMINATION: Unless sooner revoked or terminated by Grantor, this Special and Revocable Limited Power of Attorney shall become NULL and VOID from and after December 31, 2016.

Jeff Steffen, Secretary		Dated: January 6, 2015
STATE OF NEVADA)	
COUNT OF CLARK) ss)	

This Special and Revocable Limited Power of Attorney was acknowledged before me on January 6, 2015, by Jeff Steffen as Secretary of InCorp Services, Inc., a Nevada corporation

Notary Public in the State of Nevada

AURORA MURTEY

Notary Public, State of Hevada

Appointment No. 10-3630-1

My Appl. Expires Dec 17, 2018

My Commission Expires: 12