# L230006125

(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:				

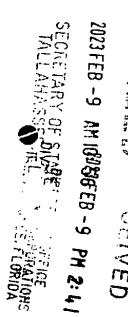
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S. CHATHAM
FEB. 10 2023

02/10/23--01002--011 \*\*1125



# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 3230! (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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GUARDIAN 245, LLC			
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		<del></del>	
			Art of Inc. File
		· <del>-</del>	LTD Partnership File
			Foreign Corp. File
			L.C. File
•			Fictitious Name File
			Trade/Service Mark
			Merger File
			Art. of Amend. File
			RA Resignation
			Dissolution / Withdrawal
			Annual Report / Reinstatement
,			Cert. Copy
			Photo Copy
			Certificate of Good Standing
			Certificate of Status
			Certificate of Fictitious Name
			Corp Record Search
			Officer Search
			Fictitious Search
Signature		. <u>.</u>	Fictitious Owner Search
			Vehicle Search
			Driving Record
Requested by:			UCC 1 or 3 File
Name	Date	Time	UCC 11 Search
			UCC 11 Retneval
Walk-In		Up	Courier

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
GUARDIAN 245, LLC	
(Must contain the words "Limited Liabi	lity 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:
832 SW 34TH AVE	832 SW 24TH AVE
BOYNTON BEACH, FL 33435	BOYNTON BEACH, FL 33435
ARTICLE III - Registered Agent, Registered Office, & Re (The Limited Liability Company cannot serve as its own Regi	
another business entity with an active Florida registration.)	
The name and the Florida street address of the registered agent are:	
BRYN LAW GROUP	$\sim$ $\sim$
Na	me and

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..

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

State

2 SOUTH BISCAYNE BLVD, STE 2600

MIAMI

City

Bryan J. Rush

Registered Agent's Signature (REQUIRED)

33131

Zip

(CONTINUED)

### ARTICLE IV-

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

Title:	Name and Address:	
"AMBR" = Authorized Member "MGR" = Manager		
MGR	Joshua Scott 3333 S. Congress Ave., Suite 402 Delray Beach, FL 33445	<u>-</u> -
MGR	Caitlin Goldman 3333 S. Congress Ave., Suite 402 Delray Beach, FL 33445	<del></del> 
MGR	Sidney Gordon 3333 S. Congress Ave., Suite 402 Delray Beach, FL 33445	<del>-</del> -
	SECRETAL TAIL TAIL	" " 2023 F Е В
(Use attachment if necessary)	SS AR	-9 AH 10
If an effective date is listed, the date must be sp he date of filing.)	meet the applicable statutory filing requirements, this date will no	ပြီays afte
ARTICLE VI: Other provisions, if any.	of State S records.	
REQUIRED SIGNATURE:		
Joshua Sco	rtt	
This document is execu I am aware that any fals	ember or an authorized representative of a member, ated in accordance with section 605.0203 (1) (b), Florida Statutes, the information submitted in a document to the Department of State the felony as provided for in s.817.155, F.S.	

## Filing Fees:

Typed or printed name of signee

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

\$ 5.00 Certificate of Status (Optional)

Joshua Scott