

1/2/25, 9:00 AM

Division of Corporations

(((H25000000278 3)))

L23000303555

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H25000000278 3)))



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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : LICENSES ETC INC
Account Number : I20070000159
Phone : (239)777-1028
Fax Number : (877)275-3593

STATE OF FLORIDA
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2025 JAN -2 PM 14:39

FILED

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: SUPPORT@LICENSESETC.COM

RECEIVED
2025 JAN -2 AM 11:25
STATE OF FLORIDA
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
GUARDIAN IMPACT WINDOWS & ROOFING LLC

Certificate of Status	0
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K. SALY

JAN 3 2025

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: GUARDIAN IMPACT WINDOWS & ROOFING LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

TODD BABBITT

Name of Person

LICENSES, ETC., INC.

Firm Company

27911 CROWN LAKE BLVD

Address

BONITA SPRINGS, FL 34135

City State and Zip Code

SUPPORT@LICENSESETC.COM

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

For further information concerning this matter, please call:

TODD BABBITT

Name of Person

at (**239**)

Area Code

777-1028

Daytime Telephone Number

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

GUARDIAN IMPACT WINDOWS & ROOFING LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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2025 JAN -2 PM 4:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 06/23/2023 and assigned
Florida document number L23000303555.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable: _____

(Principal office address MUST BE A STREET ADDRESS) _____

Enter new mailing address, if applicable: _____

(Mailing address MAY BE A POST OFFICE BOX) _____

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

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 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>	<u>Address</u>	<u>Type of Action</u>
AMBR	JUSTIN LASALLE	1489 NW 161ST AVENUE	<input checked="" type="checkbox"/> Add
		PEMBROKE PINES, FL 33028	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	ANDREW URSACHE	1489 NW 161ST AVENUE	<input checked="" type="checkbox"/> Add
		PEMBROKE PINES, FL 33028	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	COLE GOULET	1489 NW 161ST AVENUE	<input checked="" type="checkbox"/> Add
		PEMBROKE PINES, FL 33028	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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STATE OF FLORIDA
CLERK OF THE CIRCUIT COURT
IN AND FOR THE COUNTY OF DADE

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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FALLS CHURCH, VIRGINIA
CLERK OF COURT

E. Effective date, if other than the date of filing: _____ (optional)

(If an 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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated DECEMBER 30TH, 2024

Signature of a member or authorized representative of a member

ANDREW URSACHE

Typed or printed name of signee

Filing Fee: \$25.00

((H25000000278.3)))