

To:

Page 2 of 5

2023-10-20 19:01:45 GMT

13053284774

From: Yanet Avila

10/20/23, 2:17 PM

Division of Corporations

**L23000367507 1255**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H23000367507 3)))



H2300036759734BC0

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.**  
Doing so will generate another cover sheet.

To:

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

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.  
Account Number : I20000000146  
Phone : (305)444-4994  
Fax Number : (305)328-4774

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

Email Address: \_\_\_\_\_

2023 OCT 20 PM 4:39

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
SAFE GUARD INSPECTIONS GROUP LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

T. LEMPEUX

OCT 23 2023

RECEIVED

2023 OCT 20 PM 3:04

FLORIDA  
DIVISION OF  
CORPORATIONS

STATE  
DIVISION OF  
CORPORATIONS

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SAFE GUARD INSPECTIONS GROUP LLC

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

The Articles of Organization for this Limited Liability Company were filed on 10/12/2023 and assigned  
Florida document number L23000471255.

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

4755 CYPRESS GARDENS LOOP

UNIT 5307

FORT MYERS, FL 33066

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4755 CYPRESS GARDENS LOOP

UNIT 5307

FORT MYERS, FL 33066

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:

CHANGE OF ADDRESS

New Registered Office Address:

4755 CYPRESS GARDENS LOOP UNIT 5307

Enter Florida street address

FORT MYERS

City

Florida 33066

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.*

MGR = Manager  
AMBR = Authorized Member

[illegible]

F. 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 October 18, 2023

*[Signature]*

Signature of a member or authorized representative of a member