## Floridar Department of State Obvision of Corporations Electronic Filling Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : INC AUTHORITY, LLC

Account Number : I28240000004 Phone : (775)329-7721 Fax Number : (775)376-9207

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

Email Address: angelwilliams.bankerslife@gmail.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AEW SERVICES, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
- Estimated Charge	\$25.00

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OVERALLE HISTORION

From Corporate Service Center Inc 1.702.507.9682 Wed Mar 13 16:45:38 2024 MDT Page 2 of 4

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ARTICLES OF	AMENDMENT
•	0
	TO CLES OF ORGANIZATION OF  AEW SERVICES, LLC  d Liability Company as it now appears on our records. A Florida Limited Liability Company)  ability Company were filed on 02/01/24 and assigned  wing:  the limited liability company here:  ANGEL ASSET PROTECTION, LLC  ands "Limited Liability Company," the designation "LLC" or the abbreviation "LLC,"  able: 5301 EATON DR.  TADDRESS) Milton, FL 32583   5301 EATON DR.  Milton, FL 32583   or registered office address on our records, enter the name of the new
C	
	/ICES, LLC
(A Florida Limited	Liability Company)
The Articles of Organization for this Limited Liability Company	were filed on U2/U1/24 and assigned
Florida document number <u>L24000060338</u>	
This amendment is submitted to amend the following:	
This afficiation is satisfied to afficial the tonowing.	
A. If amending name, <u>enter the new name of the limited liah</u>	oility company here:
GUARDIAN ANGEL ASS	ET PROTECTION, LLC
The new name must be distinguishable and contain the words "Limited Liabi	dity Company," the designation "E.I.C" or the abbreviation "E.IC,"
Enter new principal offices address, if applicable:	5301 EATON DR.
(Principal office address MUST BE A STREET ADDRESS)	Milton, FL 32583
Enter new mailing address, if applicable:	5301 EATON DR.
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered o	ffice address on our records, enter the name of the new
registered agent and/or the new registered office address her	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	EMEL I INCHESTICS MINITES

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

. From Corporate Service Center Inc 1.702.507.9682 Wed Mar 13 16:45:38 2024 MDT Page 3 of 4 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

Title	Name	Address	Type of Action
MGR	Angel Williams	5301 EATON DR	<b>D</b> Add
		Milton, FL 32583	☐ Remove
			El Change
			□ Remove
			TALLE HASS
			SAD Add
			En.Rembre
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iffec fan e	tive date, if other than the date of fill fective date is listed, the date must be specific:	ing: IN/A and cannot be prior to d	ate of filing or more than 9	(optional) Edays after filing.) Pursu	not to 605,0207 i
Note:	2 If the date inserted in this block does no ment's effective date on the Department o	t meet the applicable			
	·				
ie re	ecord specifies a delayed effective e 90th day after the record is filed		n effective time, at	12:01 a.m. on th	e earlier of:
The	March 13th				

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Typed or printed name of signee

Filing Fee: \$25.00