## 124000207965

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2024 CT 29 PT 5: 47

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## **COVER LETTER**

SUBJECT:	Name of Limited Liab	ility Company	
The enclosed Articles of	f Amendment and fee(s) are submitted for	or filing.	
Please return all corresp	oondence concerning this matter to the fo	dlowing:	
	Jeffrey Baez		
	N	ame of Person	<del></del>
	Iron Guardian Security, LLC		
	F	irm/Company	<del></del>
	1033 Sterling Pine Pl		
		Address	
	Loxahatchee, FL 33470		
		tate and Zip Code	
	jeff.baez@gmail.com  E-mail address: (to be use	d for future annual report notification)	
For further information	concerning this matter, please call:	,	
Jeffrey Baez	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	774 280-0661	
	of Person	at ()  Area Code Daytime Telephor	ne Number
Enclosed is a check for	the following amount:	t needed _	
□ \$25.00 Filing Fee	\$30.00 Filing Fee & = 5.  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 Addre	ess:	Street Address:	

TO:

Registration Section **Division of Corporations** 

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

IRON GUARDIAN SECURITY, LLC		2024,"" 29 FV 5: 47	
( <u>Name of the Limited Lial</u> (A Flor	bility Company as it now appears on our re rida Limited Liability Company)	ecords.)	
The Articles of Organization for this Limited Liability Florida document number 124000267965	Company were filed on June 12, 202	and assigned	
This amendment is submitted to amend the following:	:		
A. If amending name, enter the new name of the li	imited liability company here:		
The new name must be distinguishable and contain the words "I	imited 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 AD	DRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>		
B. If amending the registered agent and/or registe agent and/or the new registered office address here		nter the name of the new registered	
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 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	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Jeffrey Baez	1033 Sterling Pine Pl	
		Loxahatchee, Fl. 33470	□Remove
			<b>■</b> Change
			□Add
			□ Remove
			□Change
	··········		□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗀 Add
			□ Remove
			☐ Change
		<del>-</del>	□Remove
			□ Change

	Changing the title of the authorized Member to "AMBR" to
	mutch Artice IV of Statute 5.685.0201
Note: If	date, if other than the date of filing:
ne record s ord is filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	July 24. 7024
	Signature of a greenber or authorized representative of a member
	Jeffrey Baez

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