## I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: STEPHEN RIBBLE

Electronic Signature of Registered Agent

Authorized Person(s) Detail :			
Title	MGRM	Title	MEMBER
Name	RIBBLE, STEPHEN D	Name	RIBBLE, HEATHER D
Address	4023 N ARMENIA AVE 100	Address	4023 N ARMENIA AVE 100
City-State-Zip:	TAMPA FL 33607	City-State-Zip:	TAMPA FL 33607

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**Current Mailing Address:** 

**RIBBLE, STEPHEN D** 4023 N ARMENIA AVE

TAMPA, FL 33607 US

SIGNATURE:

100

# FEI Number: 27-4967991

## Name and Address of Current Registered Agent:

# TAMPA, FL 33607 US

4023 N ARMENIA AVE 100

**Current Principal Place of Business:** 

4023 N ARMENIA AVE 100 TAMPA, FL 33607

### 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L11000019376

Entity Name: GUARDIAN ACCOUNTING GROUP LLC

Certificate of Status Desired: No

Electronic Signature of Signing Authorized Person(s) Detail

MEMBER

03/31/2019 Date

Date

## FILED Mar 31, 2019 Secretary of State 2642162565CC