

**2024 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L16000084669

**Entity Name:** WEATHER GUARD INDUSTRIES/SMJ METALS, LLC.**Current Principal Place of Business:**3000 SW 15TH STREET  
SUITE F  
DEERFIELD BEACH, FL 33442**Current Mailing Address:**3000 SW 15TH STREET  
SUITE F  
DEERFIELD BEACH, FL 33442 US**FEI Number:** 81-2560061**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**SINCLAIR, MARK A  
1897 STALLION DR  
LOXAHATCHEE, FL 33470 US*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.***SIGNATURE:** MARK SINCLAIR

12/17/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MANAGING MEMBER
Name	SINCLAIR, MARK
Address	3000 SW 15TH STREET SUITE F
City-State-Zip:	DEERFIELD BEACH FL 33442

Title	MEMBER
Name	ROSSI, LEOPOLDO
Address	3000 SW 15TH STREET SUITE F
City-State-Zip:	DEERFIELD BEACH FL 33442

Title	AUTHORIZED MEMBER
Name	SINCLAIR, NATHANIEL
Address	3000 SW 15TH STREET SUITE F
City-State-Zip:	DEERFIELD BEACH FL 33442

Title	REGISTERD AGENT
Name	VALDINI, DAVID PA
Address	299 NE 7 TH ST
City-State-Zip:	BOCA RATON FL 33432

Title	AUTHORIZED MEMBER
Name	SINCLAIR, BENJAMIN
Address	3000 SW 15TH STREET SUITE F
City-State-Zip:	DEERFIELD BEACH FL 33442

Title	AUTHORIZED MEMBER
Name	DAVIDOFF, JOSEPH
Address	3000 SW 15TH STREET SUITE F
City-State-Zip:	DEERFIELD BEACH FL 33442

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:** MARK SINCLAIR

MANAGING MEMBER

12/17/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date