FEI Number: 45-2624773 Name and Address of Current Registered Agent:			Certificate of Status Des	ired: No
CAMPBELL, CHARLES C ESQ. 96 WILLARD ST STE 203 COCOA, FL 32922 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: CHARLES C CAMPBELL, ESQ.				04/14/2021
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGRM	Title	MGRM	
Name	CAMPBELL, BARBARA A	Name	CAMPBELL, LINDEN S	
Address	P O BOX 236623	Address	P O BOX 236623	
City-State-Zip:	COCOA FL 32923	City-State-Zip:	COCOA FL 32923	

P O BOX 236623 COCOA, FL 32923-6623 US

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.

MGRM

SIGNATURE: BARBARA A CAMPBELL

04/14/2021 Date

Electronic Signature of Signing Authorized Person(s) Detail

## 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L11000074015

Entity Name: AGP HORIZONS LLC

## **Current Principal Place of Business:**

5005 FISHTAIL PALM AVE COCOA, FL 32927

**Current Mailing Address:**