

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000120637

**Entity Name:** AGILEX, LLC

**Current Principal Place of Business:**

1400 BISCAYNE BLVD.  
SUITE #115-7  
MIAMI, FL 33132

**Current Mailing Address:**

1400 BISCAYNE BLVD.  
SUITE #115-7  
MIAMI, FL 33132

**FEI Number:** 46-1303298

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BARBOZA, CARLOS A  
10777 NW 84TH LANE, #2  
DORAL, FL 33178 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title	MGRM	Title	MGRM
Name	BARBOZA, CARLOS	Name	BARBOZA, BEATRIZ
Address	10777 NW 84TH LANE APT.2	Address	10777 NW 84TH LANE APT. NO.2
City-State-Zip:	DORAL FL 33178	City-State-Zip:	DORAL FL 33178

*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:** CARLOS BARBOZA

**MANAGER**

**04/18/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date