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: GOYKHMAN . JULIA	MGRM	03/13/2017			

Entity Name: ARGO FAMILY 2117 LLC

2017 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

251 174TH STREET UNIT 2117 SUNNY ISLES BEACH, FL 33160

DOCUMENT# L15000093875

Current Mailing Address:

231 174TH STREET **UNIT 1212** SUNNY ISLES BEACH, FL 33160 US

FEI Number: 35-2535684

Name and Address of Current Registered Agent:

GOYKHMAN, JULIA 18101 COLLINS AVE 3301 SUNNY ISLES BEACH, FL 33160 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	GOYKHMAN , JULIA			03/13/2017	
	Electronic Signature of Registered Agent			Date	
Authorized Person(s) Detail :					
Title	MGRM	Title	MGR		
Name	GOYKHMAN, JULIA	Name	GOYKHMAN , JULIA		
Address	18101 COLLINS AVE., UNIT 3301	Address	18101 COLLINS AVE 3301		
City-State-Zip:	SUNNY ISLES BEACH FL 33160	City-State-Zip:	SUNNY ISLES BEACH FL 3316	50	

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: GOYKHMAN, JULIA

Certificate of Status Desired: No

Date