

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000024442

**Entity Name:** ARGENROSS INVESTMENTS LLC

**Current Principal Place of Business:**

915 MIDDLE RIVER DR.  
SUITE 408  
FT.LAUDERDALE, FL 33304

**Current Mailing Address:**

915 MIDDLE RIVER DR.  
SUITE 408  
FT.LAUDERDALE, FL 33304 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

VA, MIGUEL  
915 MIDDLE RIVER DR.  
SUITE 408  
FT.LAUDERDALE, FL 33304 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 AMBR  
Name GONZALEZ, ADRIANA B  
Address 915 MIDDLE RIVER DR.  
SUITE 408  
City-State-Zip: FT.LAUDERDALE FL 33304

Title AMBR  
Name ROSSI, FRANCO D  
Address 915 MIDDLE RIVER DR.  
SUITE 408  
City-State-Zip: FT.LAUDERDALE FL 33304

Title AMBR  
Name ROSSI, MATIAS L  
Address 915 MIDDLE RIVER DR.  
SUITE 408  
City-State-Zip: PLANTATION FL 33304

*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:** ADRIANA B GONZALEZ

AMBR

03/02/2022

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

\_\_\_\_\_  
Date