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: ANGEL E PIEDRAHITA BENAVIDES	MANAGER	01/15/2024		

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L21000340414

Entity Name: AGRO-INDUSTRIAL CENTER LLC

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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

9939 NW 89 AVE UNIT 4 MEDLEY, FL 33178

### **Current Mailing Address:**

9939 NW 89 AVE UNIT 4 MEDLEY, FL 33178 US

## FEI Number: 87-1890112

# Name and Address of Current Registered Agent:

PIEDRAHITA, ANGEL E 9939 NW 89 AVE UNIT 4 MEDLEY, 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	: ANGEL E PIEDRAHITA		01/15/2024	
	Electronic Signature of Registered Agent		Date	
Authorized Person(s) Detail :				
Title	MGR	Title	MGR	
Name	PIEDRAHITA BENAVIDEZ, PAOLA A	Name	PIEDRAHITA BENAVIDES, ANGEL E	
Address	9939 NW 89 AVE UNIT 4	Address	9939 NW 89 AVE UNIT 4	
City-State-Zip:	MEDLEY FL 33178	City-State-Zip:	MEDLEY FL 33178	

Certificate of Status Desired: No

01/15/2024

### FILED Jan 15, 2024 Secretary of State 9284035741CC

Date