Division of Corporations Electronic Filing Cover Sheet

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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AGC SOLUTIONS, LLC

Certificate of Status	0
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Page Count	03
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Electronic Filing Menu

Corporate Filing Menu

Hal BRYAN

NOV -8 2010

**EXAMINER** 

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AGC SOLUTIONS, LLC

(A Florida Limited Liability Company)				
The Articles of Organization for this Limited Liability Company were fi	iled on NOVEMBNER 5, 2010 and assigned			
Florida document numberL08000098109				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liability co	mpony here:			
The new name must be distinguishable and end with the words "Limited Liab"L.L.C."	oility Company," the designation "LLC" or the abbreviation			
Enter new principal offices address, if applicable:	PR 80 -			
(Principal office address MUST BE A STREET ADDRESS)	>			
,	χχ <b>σ</b>			
Enter new mailing address, if applicable:	2 di 👝			
(Mailing address MAY BE A POST OFFICE BOX)	RID.			

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:	Enter Flor	rida street address
	Cin	, Florida

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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(H1000002416083)

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records;

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action			
MGRM	AITZA GONZALEZ	2732 CAYMAN WAY ORLANDO, FL 32812	Add Remove			
MEMBE.	JESUS M. RIVERA	2732 CAYMAN WAY ORLANDO, FL 32812	Add Remove			
MGRM	GYRAIZA CASTRO	2732 CAYMAN WAY ORI ANDO_EI _32812	Add ₹ Remove			
			Add Remove			
		•	Add Remove			
			Add Remove			
D. If amendir	ng any other information, enter change	(s) here: (Attach additional sheets, if necessary				
Dated	NOVEMBER 5 201	<u>o</u>	10 NOV -5 AM 8: 07 SECRETARY OF STATE ALLAHASSEE, FLORID.			
_		or authorized representative of a member	<del></del>			
		ZA GONZALEZ r printed name of signee	<del></del>			
Page 2 of 2						

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Filing Fee: \$25.00 (H1000003416083)