# #L13000030162

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MAY 2 9 2013

# **COVER LETTER**

Division of Co	rporations					
SUBJECT:	A&G INTEGRAL SERVICES LLC					
		ited Liability Company	<del></del>			
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.				
	ondence concerning this matte	_				
		BOZA, ALVARO S				
		Name of Person				
	A&G INTEGRAL SERVICES LLC					
	Firm/Company					
	11025 N. KENDALL DR #210					
		Address				
	MIAMI, FL 33176					
	City/State and Zip Code					
	info@agintegralservices.com  E-mail address: (to be used for future annual report notification)					
For further information	concerning this matter, please of	-	,			
An	dres Hurtado	at ( 305 )	423-8932			
Name of Person			Daytime Telephone Number			
Enclosed is a check for	the following amount:					
▼ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	closed) Certified	te of Status &		

### MAILING ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

### STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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SECRET ALLAHA ds.)	SSEE,	FSTA FLORIL	J.E. DA:

## A&G INTEGRAL SERVICES LLC

(Name of the Limited Liability Company as it now appears on our records
(A Florida Limited Liability Company)

02/27/2013 The Articles of Organization for this Limited Liability Company were filed on and assigned L13000030162 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 Florida street address \_, 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 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

Title	Name	Address	Type of Action
MGR	PARRA, CARLOS O.	11025 N. KENDALL DR #210 MIAMI, FL 33176	✓ Add Remove
	<del></del>		Add Remove
			Add Remove
			Add
			Add Remove
			Add
D. If amendi ——	ng any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary	<i>)</i>
Dated	MAY 20 2	$///_{0}/_{0}/_{0}$ . EIN- 46	Services LLC 2154928 FL USA.
-	$/$ $V_{\rm E}$	er or authorized representative of a member  BOZA, ALVARO S  id or printed name of fignce	

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