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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Guaresnei LLC			
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			 Art of Inc. File
	<u>.</u>		 LTD Partnership File
			 Foreign Corp. File
			 L.C. File
			 Fictitious Name File
			 Trade/Service Mark
			 Merger File
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			 RA Resignation
			 Dissolution / Withdrawal
			 Annual Report / Reinstatement
			 Cert. Copy
			 Photo Copy
			 Certificate of Good Standing
		!	 Certificate of Status
			 Certificate of Fictitious Name
			 Corp Record Search
			 Officer Search
			 Fictitious Search
Signature			 Fictitious Owner Search
-			 Vehicle Search
			 Driving Record
Requested by: SETH			 UCC 1 or 3 File
Name	Date	Time	 UCC 11 Search
1794110	Duit	- 11110	 UCC Retrieval

COVER LETTER

Division of	Corporations		
	ESNEI, L.L.C.		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Article	s of Amendment and (ee(s) are sub	omitted for filing.	
Please return all corr	espondence concerning this matter	to the following:	
	Gabriela Altieri		
		Name of Person	
	AGA PARTNERS LLC		
	·	Firm/Company	
	5080 N OCEAN DR. AP?	T 18 D	
		Address	
	RIVIERA BEACH FL 33	404	
		City/State and Zip Code	
	gabrielaaltieri@hotmail.com E-mail address:	in to he used for future annual report no	tification)
For further information	on concerning this matter, please o		
Gabriela Altieri		305 773-8878	·
Nac	ne of Person	at () Area Code Daytin	me Telephone Number
Enclosed is a check for	or the following amount:		
富 \$25.00 Filing Foo	c □ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Ado Registratio		Street Address: Registration Se	ection
Division o	f Corporations	Division of Co The Centre of	orporations
P.O. Box (JJ&1	the Centre of	1 41141143366

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 24, 2022

CAPITAL CONNECTION

SUBJECT: GUARESNEI, L.L.C. Ref. Number: L17000250171

2022 AUG 30 FH 2: 18

We have received your document for GUARESNEI, L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please add the periods in the LLC name to match DOS records.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 822A00018829

Neysa Culligan Regulatory Specialist III

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 AUG 30 AM 9: 02

SEUN TALLAHASSEE FL

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

The Articles of Organization for this Limited I	Liability Company	were filed on 12/6/2	017	and assigned
Florida document number L17000250171	·			
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liabil	lity company here:		
The new name must be distinguishable and contain the	words "Limited Liabili	ty Company," the design	nation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if appli-	cable:			
DEALER A DEACH				
				
Enter new mailing address, if applicable:		5080 N OCEAN DE	R. APT 18D	
(Mailing address MAY BE A POST OFFICE BOX)		RIVIERA BEACH		
		33404 FL		
5 5	•	ddress on our recor	rds, <u>enter the name</u>	of the new registered
Name of New Registered Agent:	AGA PARTNEI	RS LLC		
New Registered Office Address:	5080 N OCEAN	DR. APT 18D		
		Enter Florida s	street address	
	RIVIERA BEAG	CH	, Florida <u>334</u>	04
	<u> </u>	City		Zip Cnde

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 605, 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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person heing added or removed from our records:

· .

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	GASTON HECTOR ETTEDGUI	7064 SW 114th PL	☐Add
		APT G	≣Remove
		MIAMI, FL 33173	
MGR	VOICES & VOICES HUB LLC	3524 SILVERSIDE RD	\(\begin{align*} \begin{align*} align
		STE 35B	□ Remove
		WILMINGTON DE 19810	□Change
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Effective date, if other than the date of a (Ifan effective date is listed, the date must be specific	filting: fic and cannot be prior	to date of filing or me	ore than 90 days at	rnonai) Rer filing.) Pursu	ant to 605.0	207 (3)(
Note: If the date inserted in this block does document's effective date on the Department	not meet the applica	able statutory filing	g requirements, t	this date will no	ot be listed	as the
he record specifies a delayed effective date, bu ord is filed.	ut not an effective ti	me, at 12:01 a.m. o	on the earlier of:	(b) The 90th	day after t	he
August 22 rd	2022					
Dated	—, _	-· 10				
		43				
Signature	of a member or autho	rized sepresentative	of a member		_ 	
	Arturo Ro	odolfo Cuadrado				

Filing Fee: \$25.00