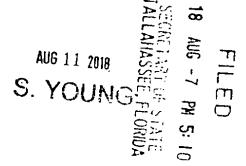
L18000 175912

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

Office Use Only



200316610342



COVER LETTER

то:	Registration Section Division of Corporations			
SUBJE				
	Nar	ne of Limited	d Liability Company	
Dear Si	r or Madam:			
The end	closed Registered Agent/Registered Off	fice Change a	and fee(s) are submitted for filing.	
Please 1	return all correspondence concerning th	nis matter to t	the following:	
Jaime	Jaramillo			
	Name of Person	-		
Aggte	ch LLC			
	Firm/Company	•		SECKY
160 W	/. Bay Cedar Circle			AUG -
	Address			
Jupite	r FL 33458			PK 5: 10 PK 5: 10 F STATE FLORIDA
	City/State and Zip Code			A E E
jjaram	il@yahoo.com			
E-	mail address: (to be used for future and	iual report no	otification)	
For furt	her information concerning this matter	, please cail:		
Jaime	Jaramillo	561	768-9303	
	Name of Person	\	Area Code & Daytime Teleph	hone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
	Enclosed is a check for the following	amount:		
	■ \$25 Filing Fee	٥	\$55 Filing Fee & Certified Copy	

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

I. Na	ame of the limited liability company: Aggtech LLC						
2. (a)	160 W. Bay Cedar Circle	((b) 160 W. Bay Cedar Circle				
2. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`	Mailing address of limited liability compa (Note: MAY BE POST OFFICE BO.				
	Jupiter Florida 33458		Jupig	gter Florida 3345	58		
	Julye 23 2018		L1800	00175912			
3.	Date of filing/registration in Florida	4.		Document nur	nber		
5. (a)	Cheyenne Moseley US CORP Agents						
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 13302 Winding Oak Court A			State:	FI 18 AUG SLOKET, TALLAHA		
					FILED NG -7 PM TARKER WHASSEE, F		
	Tampa	33612					
(b)	Jaime Jaramillo Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : <u>NEW Registered Office Address:</u>				D PN 5: 10 F STATE FLORIDA		
	160 W. Bay Cedar Circle						
	Jupiter, FI	33458		<u> </u>			
the cha agent w was/we	imited liability company is not organized under the layinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited libere authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	`the reg ability c of the lir	istered o ompany. nited lial	ffice and the busing , it is hereby confir bility company or a	ess office of the registered med that the change(s)		
_	Airfin	Jai	me Jar	amillo			
l herel provisi the obli to mere notified	the old member of authorized representative of a member by accept the appointment as registered agent and agrous of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I if in writing of this change.	ee to ac perforn d for in hereby c	t in this vance of Chapter confirm t	Printed or typed capacity. I further my duties, and I an 605, F.S. Or, if th hat the limited liah	agree to comply with the		
	Division of Corporations • P.O. F	3ox 632	7• Talla	ihassee, FL 32314			

FILING FEE: \$25.00