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· COVER LETTER

SUBJECT:	165 Trust Lu	.c				
SUBJECT:						
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.				
Please return all correspon	ndence concerning this matter	to the following:				
	Andrew	Gaines				
	Division of Corporations DECT: AGT Trust Luc Name of Limited Liability Company enclosed Articles of Amendment and fee(s) are submitted for filing. secretum all correspondence concerning this matter to the following: Andrew Granes Name of Person Firm/Company 3200 Salt Marsh Cir Address W. Melbourne Ft. 32904 City/State and Zip Code and rew gaines 88 @ gmail. Com E-mail address: (to be used for future anneal report notification) further information concerning this matter, please call: Andrew Granes Area Code Daytime Telephone Number osed is a check for the following amount: \$25.00 Filing Fee Scorificate of Status Certified Copy (additional copy is enclosed) Mailing Address: Registration Section Street Address: Registration Section					
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	3200 S	alt Marsh Cir				
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Andrew	Gernes	at(407) 630-	3812			
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For further information converges and reconverges as check for the \$25.00 Filing Fee Mailing Address Registration S Division of Converges and reconverges are seen as a check for the second s	Andrew 3200 S. W. Milbour Andrew gain E-mail address: (concerning this matter, please of Status) Person e following amount: S30.00 Filing Fee & Certificate of Status Ection Corporations 7	Name of Person Firm/Company LL Marsh Cir Address Company City/State and Zip Code City/State and Zip Code Company Local Company City/State and Zip Code Company City/State and Zip Code Company Company Company City/State and Zip Code Company Company Company City/State and Zip Code Company Co	38/2 ne Telephone Number S60.00 Filing Fee, Certificate of Status Certified Copy tadditional copy is encle			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

The Articles of Organization for this Limited Liability Company were filed on and assigned Florida document number L20000012453. 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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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

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.

City

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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		Signature of a	i member or au	thorized repres	entative of a me	mber		