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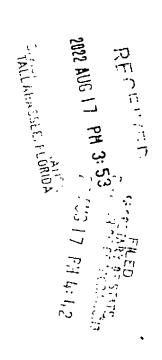
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S. CHATHAM AUG 17 2022



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### **COVER LETTER**

TO: New Filing Section Division of Corporations	
SURJECT: AGG PA	Limited Liability Company
The enclosed Articles of Organization and fee(s	s) are submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Samantha	Name of Person
14 G F1	POTTIS LLC
	Firm/Company
6213 N.W. 1	5thCti -
Margate	Address 32063
Saman that	City/State and Zip Code 5 0821 2 9 mail. Com
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, p	blease call:
	please call:
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$130.00 Filing Fee Certificate of Statu	
Mailing Address	Street Address
New Filing Section	New Filing Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:
The name of the Limited Liability Company is:
AGG MONISLLC
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE 11 - Address:  The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
6213 NW 15th J. (213 NW 15th Ct. Margare, 423063
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:  Sawanna Singley  Name  6213 N.W. 544  Florida street address (P.O. Box NOT acceptable)  City State Zip
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. P further agree to comply with the provisions of all flatutes relating 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  Registered Agent's Signature (REQUIRED)
(CONTINUED)

Title: "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager		
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<del></del>	6213 NW 15-Th 15-1-0	_
	Margate, FL 3306	3
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	<del></del>	
(Use attachment if necessary)	<i>f</i> ,	
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

ARTICLE IV-