

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220004019163)))



H220004019163ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : BUSINESS ACCOUNTING PROFESSIONALS CORP

Account Number : 120190000020 Phone : (786)953-7449 Fax Number : (786)953-7450

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_______

39 FLORIDA LIMITED LIABILITY CO. AGR CAPITAL LLC Certificate of Status Certified Copy

Page Count Estimated Charge \$125.00

Electronic Filing Menu Corporate Filing Menu

Help



Articles of Organization For Florida Limited Liability Company

The undersigned company, for the purpose of forming a Florida limited liability company, hereby adopts the following Articles of Organization:

Article I

The name of the limited liability company is: AGR CAPITAL LLC

Article II

The street address of the principal office of the Limited Liability Company is: 27325 SW 133RD AVENUE HOMESTEAD, FL. 33032

The mailing address of the Limited Liability Company is: 27325 SW 133RD AVENUE HOMESTEAD, FL. 33032

Article III

Other provisions, if any:

ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

ALEXIS GONZALEZ 27325 SW 133RD AVENUE HOMESTEAD, FL. 33032

Having been named as a registered agent and to accept service of process of 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. I further agree to comply with the provisions of all statutes 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.

Registered Agent Signature:	Muns 2012
-----------------------------	-----------

Article V

The name and address of person(s) authorized to manage the LLC:

Title: AMBR ALEXIS GONZALEZ 27325 SW 133RD AVENUE HOMESTEAD, FL. 33032 51% MEMBER

Signature: North Andre

Title: AMBR
JORGE DE LA CONCEPCION
380 MIRACLE MILE
MIAMI, FL. 33134
49% MEMBER

Signature:

Article VI

The effective date of this Limited Liability Company Shall be:

11/28/2022

Signature of member or an authorized representative:

Signature: Wy 6.202

I am a member or authorized representative submitting these Articles of organization and affirm that the facts state herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provide for in S.817.155. F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following the formation of the LLC and every year thereafter to maintain "active" status.