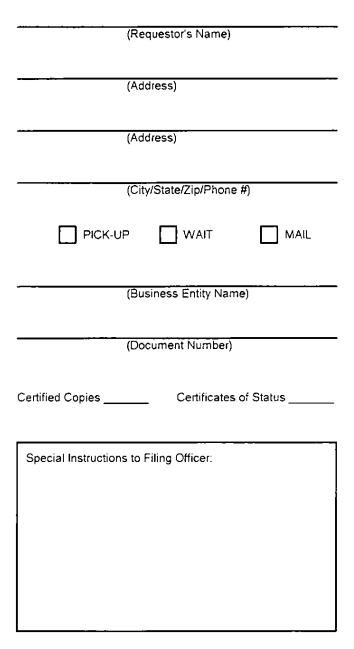
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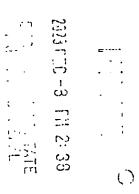


Office Use Only



600420010446

12/08/23--01024--018 **25.00



COVER LETTER

TO: Registration S Division of Co					
	Consultants, LLC				
SUBJECT:	Name of Lim	ited Liability Company	•		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
	ondence concerning this matter	-			
	George L Gomez				
		Name of Person			
	AG Loan Consultants, LLC				
		Firm/Company			
	3412 Fernwood Dr.				
	Address				
	Kissimmee, FL 34741				
		City/State and Zip Code			
	loanconsultantsag@gmail.ed	om to be used for future annual report notifical	tion)	20231	
For further information of	concerning this matter, please or		non	; }	
George Gomez		720 275-6296		0	
Name (of Person		elephone Number	Fix 2: 0	. 2
Enclosed is a check for t	the following amount:			30	0
■ \$25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (e of Status &	
Mailing Addre Registration		<u>Street Address:</u> Registration Section	on.		

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AG Loan Consultants, LLC		
(<u>Name of the Limited Liability Con</u> (A Florida Limit	opany as it now appears on our records.) ed Liability Company)	
The Articles of Organization for this Limited Liability Compa	ny were filed on 06-14-23	and assigned
lorida document number L23000287919		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
he new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC" or the	: abbreviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS		<u> </u>
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
o real and a second of the sec		of the new posiston
3. If amending the registered agent and/or registered offingent and/or the new registered office address here:	ce address on our records, enter the in	ante of the new register
		:
Name of New Registered Agent:		
		co .
New Registered Office Address:	Enter Florida street address	
	· ·	Zin Code
	, Florida	Zip Code (5) CO

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

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>	Name	Address	Type of Action
MGR	George L Gomez	3412 Fernwood Dr. Kissimmee FL 34741	≅Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			CJAdd
			□Remove
			□ Change
			□Add
			□ Change 2: 3:3
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Chun

. If amending any other information, enter change(s) here: (Attach additional sheets, if neo	vessary.)
	8 - 4V
	
	
	
	
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Effective date, if other than the date of filing:	is date will not be listed as the
document's effective date on the Department of State's records.	17 00 17 00 17 00
ne record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (ord is filed.	b) The 90th day after the
Durad 12-4-23	
Dated	
Signature of a member or authorized representative of a member	
George L Gomez Typed or printed name of signee	

Filing Fee: \$25.00