# Florida Department of Sta

Division of Corporations **Electronic Filing Cover Sheet** 

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(((H230003016183)))



H230003016183ABCY

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To:

Division of Corporations

Fax Number : (850)617-6383

from:

Account Name : EQUIPTRADE AMERICA INC

Account Number : I2023000068 Phone : (954)990-5117 Fax Number : (954)368-2360

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

Email Address:

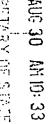
#### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AGG ENTERPRISE, LLC

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SEP 0 5 2023

## COVER LETTER

FO: Registration Section of Corp.	tion orations				
AGG ENTE	RPRISE, LLC				
SUBJECT:	Name of Limit	ted Liability Company			
	Amendment and fee(s) are sub-				
Please return all correspo					
	ROSALBA CARRASQUI	EL			
		Name of Person			
	HC FINANCIAL SERVICE	CES INC			
		FirmvCompany			
	4700 N HIATUS ROAD	SUITE 155			
	<del></del>	Address			
	SUNRISE, FLORIDA,33	351			
		City/State and Zip Code			
	helinancialservicesfl@gma			20	
	E-mail address:	(to be used for future annual report notif	ication)	23 /	
For further information	concerning this matter, please o	cali:	<del>वि</del>	30.	*14-
Rosalha Carrasquel		954 6255177 at ( )	(A)	30	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Name	of Person	at ()	Telephone Number		(
Enclosed is a check for t	he following amount:			္ကြင္သ	
■ \$25.00 Filing Fee	Certificate of Status	(additional copy is enclosed)	\$60.00 Filing For Certificate of S Certified Copy (additional copy is	tatus &	

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Control of Tollahaman

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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### ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

AGG ENTERPRISE, LLC	as it now appears on our records.)	31 5
AGG ENTERPRISE, LLC  (Name of the Limited Liability Compan (A Florida Limited Li	ability Company)	
		and assigned
The Articles of Organization for this Limited Liability Company	were filed on	
Florida document number L23000403030		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
•••		
(Principal office uddress 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 a agent and/or the new registered office address here:	ddress on our records, <u>enter t</u>	the name of the new registered
agent and of the new registered brice address here:		
N		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flor	rida
	City	Zip Code

#### New Registered Agent's Signature, if changing Registered Agent:

HC Financial Services

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.

If Changing Registered Agent, Signature of New Registered Agent

8 30 23, 10:13a HC Financial Services 9543682360 p.4

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

AMBR = Ai	ithorized Member		Type of Action
<u>Title</u>	<u>Name</u>	Address	түре от Аспол
MGR	BRAZON VASQUEZ, RAFAEL	3512 SW 171 AVE MIRAMAR, FL 33027	[]Add
			=Remove
			Change
			CIAdd
			☐ Change
			□∧dd
			[]Remove
			Change
	<del></del>		Remove
			☐ Change
			DAdd
			□ Change

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	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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an effi lote:	ive date, if other than the date of filing:  extive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ent's effective date on the Department of State's records.
r <del>e</del> cor I is fil	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after tiled.
ated	08-29-2023
accu	Atom' Di Tutta Signatury of a rhember or authorized representative of a member

Filing Fee: \$25.00