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(Requestor's Name)	
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(Business Entity Name)	
(Document Number)	-
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COVER LETTER

TO: **Registration Section Division of Corporations**

H&G AGENCY SERVICES LEC

. .

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

CARLOS J BARBOSA

Name of Person

MATRIX INTERNATIONAL BUSINESS CONSULTING ELC

Firm/Company

759 SW FEDERAL HIGHWAY SUITE 304

Address

STUART, FL 34994

City/State and Zip Code

INFO@ MATRIX-USA US

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CARLOS J BARBOSA

Name of Person

561 9029038 at (____ Daytime Telephone Number Area Code

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□ \$30.00 Filing Fee & Certificate of Status □ \$55.00 Filing Fee & Certified Copy-(additional copy is enclosed). □ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

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

Street Address: **Registration Section Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee, FL 32303

SUBJECT:

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H&G AGENCY SERVICES LLC

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on <u>09/28/2023</u> and assigned Florida document number <u>1.23000450141</u>.

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, <u>enter the name of the new registered</u> agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street add	dress
	(iŭ.	Florida Zip Code

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.

(1)

MGR = ' Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	HERRERA ACERO, ANDRES FELIPE	759 SW FEDERAL HIGHWAY SUITE 304	🗆 Add
		STUART. FL 34994	Remove
			🗆 Change
MGR	LUZ N. GONZALEZ	759 SW FEDERAL HIGHWAY SUITE 304	
		STUART, FL 34994	🗆 Remove
			□ Change
			🗆 Add
			🗆 Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 21ST AUGUST 2024 ł. 101

Signature of a member or authorized representative of a member

HERRERA ACERO, ANDRES FELIPE

Typed or printed name of signee