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.

(((H240000989413)))



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)617-6383

From:

Account Name : B RILEY WEALTH TAX SERVICES INC

Account Number : 120120000051

: (305)937-7773

Fax Number

: (815)301-2897

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AG R.E. HOLDING LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AG R.E. HOLDING LLC		
(Name of the Lin	ited Liability Company as it now appears on our records. (A Florida Limited Liability Company)	.)
he Articles of Organization for this Limited	Liability Company were filed on January 24, 2024	and assigned
orida document number L24000053901	·	
his amendment is submitted to amend the fo	llowing:	
. If amending name, enter the new name	of the limited liability company here:	
ie new name must be distinguishable and contain the	words "Lumited Liability Company," the designation "LLC" icable:	or the abbreviation "A.L.C."
nter new principal offices address, if appl	icable:	<u>5/4 </u>
Principal office address MUST BE A STRE		- 35
rincipal office address in UST DE A STRE	LIADDRESSI	
		υ ₋
		7. A.
iter new mailing address, if applicable:		<u>. ω</u>
talling address MAY BE A POST OFFICE	<u></u>	
If amending the registered agent and/or	registered office address on our records, enter t	he name of the new register
gent and/or the new registered office addr	ress here:	
Name of New Registered Agent:	ALEXANDER GOLDBERG	
N. Dii Office Address:		
New Registered Office Address:	Enter Florida street address	
	. Flo	rida
	City	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.

If Thunging Registered Agent, Signature of New Registered Agent

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>	<u>Name</u>	Address	Type of Action
AMBR	GOLDBERG, ALEXANDER	19961 NE 37TH CT	
		AVENTURA, FL 33180	□Remove
			■Change
			Remove
			□ Change
			□Add
			□Remove
			Change
			□Add
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			□Add
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			Change
			(]Add
			□Remove
			Change

Effective date, if other than the date of filling: [(an effective date is litted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 805.020 Note: If the date inserted in this block does not meet the applicable statutory filling requirements, this date will not be listed as document's effective date on the Department of State's records. 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 ord is filed. Dated MARCH 13 2024 Signature of a member or authorized representative of a member ALEXANDER GOLDBERG						
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Filing Fee: \$25.00