

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000047430

Entity Name: A.G. PLACE INVESTMENTS, LLC

Current Principal Place of Business:

18331 PINES BLVD
281
PEMBROKE PINES, FL 33029

Current Mailing Address:

18331 PINES BLVD
281
PEMBROKE PINES, FL 33029 US

FEI Number: 43-2084028

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DUARTE DE GONCALVES, MARIBEL
10749 NW 70TH LN
DORAL, FL 33178 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

| | | | |
|-----------------|------------------------------|-----------------|-----------------------|
| Title | MGRM | Title | MGRM |
| Name | DUARTE DE GONCALVES, MARIBEL | Name | GONCALVES, DUBRASKA Y |
| Address | 10749 NW 70TH LN | Address | 10749 NW 70TH LN |
| City-State-Zip: | DORAL FL 33178 | City-State-Zip: | DORAL FL 33178 |
| | | | |
| Title | MGRM | | |
| Name | GONCALVES, ABEL D | | |
| Address | 10749 NW 70TH LANE | | |
| City-State-Zip: | DORAL FL 33178 | | |

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARIBEL DUARTE DE GONCALVES

MGRM

03/22/2014

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date