

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000073101

Entity Name: AG WORKS, LLC

Current Principal Place of Business:

401 CLAY DR.
ST CLOUD, FL 34769

Current Mailing Address:

401 CLAY DR.
ST CLOUD, FL 34769

FEI Number: 20-3207141

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GLASSCOCK, SCOTT
401 CLAY DR.
ST CLOUD, FL 34769 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
Name GLASSCOCK, SCOTT
Address 401 CLAY DR.
City-State-Zip: ST CLOUD FL 34769

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: SCOTT GLASSCOCK

OWNER

03/23/2016

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date