L18000195274

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10/18/21--01033--025 **25.00



COVER LETTER

10: Registration Section of Corp.			\$	•
			,	•
SUBJECT: Algen Cosmo		nited Liability Company		
	Name of Em	med Liaomty Company		
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.		
Please return all correspond	dence concerning this matter	to the following:		
	Cammy Duvall			
		Name of Person		
	Algenol Specialty Ingredie	ents, LLC		
		Firm/Company		
	16151 Lee Road			
	TOTAL FACE ROAD	Address	 	
	27 . 14 . 17 . 200.2	 -		
	Fort Myers, FL 33912	City/State and Zip Code		
	cammy.duvall@algenol.cor	•		
	E-mail address: (to be used for future annual re	port notification)	
For further information con	cerning this matter, please ca	all:		
Cammy Duvall Name of P	heron	at (<u>239</u>) <u>441</u> Area Code	6327 Daytime Telepho	
rvaine of f	Craon	Area Code	глауите гетерис	one Number
Enclosed is a check for the	following amount:			
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee &	F) \$55.00 Uilley Foo &		\$60.00 million mar
= 323.00 1 mmg / CC	Certificate of Status	S55.00 Filing Fee & Certified Copy	<u></u>	\$60.00 Filing Fee, Certificate of Status &
		(additional copy is enclos	sed)	Certified Copy (additional copy is enclosed)
				
Mailing Address:		Street Add	ress:	

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Limited Co.		
(<u>Name of the Limited Liability Company</u> (A Florida Limited Lia	as it now appears on our records.)	
The Articles of Organization for this Limited Liability Company w Florida document number <u>L18000195274</u>		_ and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabilit	ty company here:	
Algenol Speciaty Ingredients, LLC The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the abbrev	riation "L.L.C."
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 add agent and/or the new registered office address here:	lress on our records, <u>enter the name of</u>	the new registered
Name of New Registered Agent:		7627
New Registered Office Address:		
	Enter Florida street address	<u>(a)</u>
	, Florida	. 70
	City	ip Gode 😑
New Registered Agent's Signature, if changing Registered Agent:		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

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 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
			
		·	□Remove
			□ Change
			
			□Remove
			□ Change
			□Add
			□ Remove
		·	□Change
			□Add
			□Remove
			□Change
			□Remove
			□Change
			□ Add
		□Remove	
			□Change

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