| 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; an |

: and that my name appears above, or on an attachment with all other like empowered.

VP

SIGNATURE: KLAUS STADTHAGEN

Electronic Signature of Signing Authorized Person(s) Detail

| | Electro | nic Si | ignat | ure of | Regist | tered / | Agent |
|--|---------|--------|-------|--------|--------|---------|-------|
| | | | | - | | | |

| Authorized | Person(s) Detail : | | |
|---|---|---|--|
| Title | CHAIRMAN | Title | DIRECTOR |
| Name | BRITO, ENRIGUE | Name | VALDES, MACARIO |
| Address | 3800 MCINTOSH ROAD | Address | 3800 MCINTOSH ROAD |
| City-State-Zip: | PORT EVERGLADES FL 33316 | City-State-Zip: | PORT EVERGLADES FL 33316 |
| Title | VP | Title | CFO |
| Name | STADTHAGEN, KLAUS | Name | PINOCHET, LUIS |
| Address | 3800 MCINTOSH ROAD | Address | 3800 MCINTOSH ROAD |
| City-State-Zip: | PORT EVERGLADES FL 33316 | City-State-Zip: | PORT EVERGLADES FL 33316 |
| | | | |
| Title | DIRECTOR | Title | DIRECTOR |
| Title Name | DIRECTOR MONTALBETTI, FRANCO | Title Name | DIRECTOR MANCILLA, LUIS |
| | | | |
| Name | MONTALBETTI, FRANCO 3800 MCINTOSH ROAD | Name | MANCILLA, LUIS |
| Name Address | MONTALBETTI, FRANCO 3800 MCINTOSH ROAD | Name Address | MANCILLA, LUIS 3800 MCINTOSH ROAD |
| Name Address City-State-Zip: | MONTALBETTI, FRANCO 3800 MCINTOSH ROAD PORT EVERGLADES FL 33316 | Name Address City-State-Zip: | MANCILLA, LUIS 3800 MCINTOSH ROAD PORT EVERGLADES FL 33316 |
| Name Address City-State-Zip: Title | MONTALBETTI, FRANCO 3800 MCINTOSH ROAD PORT EVERGLADES FL 33316 DIRECTOR | Name Address City-State-Zip: Title | MANCILLA, LUIS 3800 MCINTOSH ROAD PORT EVERGLADES FL 33316 DIRECTOR |

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.

Current Mailing Address:

SIGNATURE:

Name and Address of Current Registered Agent:

CORPORATION COMPANY OF MIAMI 200 SOUTH BISCAYNE BOULEVARD **SUITE 4100** MIAMI, FL 33131 US

2018 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L04000070094

Entity Name: FLORIDA INTERNATIONAL TERMINAL, LLC

Current Principal Place of Business:

4100 MCINTOSH RD PORT EVERGLADES, FL 33316

3800 MCINTOSH ROAD PORT EVERGLADES. FL 33316 US

FEI Number: 20-2737471

Certificate of Status Desired: No

FILED Aug 29, 2018 Secretary of State CC6124208622

Date

08/29/2018 Date