2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000106468

Entity Name: BUNGE LATIN AMERICA, LLC

Current Principal Place of Business:

2655 S. LEJEUNE ROAD MIAMI, FL 33134

Current Mailing Address:

2655 S. LEJEUNE ROAD MIAMI, FL 33134 US

FEI Number: 20-5846120

Name and Address of Current Registered Agent:

CORPORATION SERIVCE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US

Date

FILED

Certificate of Status Desired: No

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

Authorized Person(s) Detail :

Title	PRESIDENT, DIRECTOR	Title	TREASURER
Name	HORCASITAS, RAFAEL	Name	ELLIOTT, AARON L
Address	2655 LE JEUNE ROAD, SUITE 610	Address	1391 TIMBERLAKE MANOR PKWY
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	CHESTERFIELD MO 63017
Title Name	ASSISTANT SECRETARY KUTILEK, LORI F.	Title Name	CONTROLLER ALLEN, LOU
Address	1391 TIMBERLAKE MANOR PKWY	Address	1391 TIMBERLAKE MANOR PKWY
City-State-Zip:	CHESTERFIELD MO 63017	City-State-Zip:	CHESTERFIELD MO 63017
Title	ASSISTANT CONTROLLER	Title	ASSISTANT CONTROLLER
Title Name	ASSISTANT CONTROLLER BELCASTRO, PETER	Title Name	ASSISTANT CONTROLLER GREGORCY, PHILIP
Name	BELCASTRO, PETER	Name	GREGORCY, PHILIP
Name Address	BELCASTRO, PETER 1391 TIMBERLAKE MANOR PKWY	Name Address City-State-Zip: Title Name Address	GREGORCY, PHILIP 1391 TIMBERLAKE MANOR PKWY CHESTERFIELD MO 63017 DIRECTOR FERNANDEZ, ALEJANDRO 2655 S. LEJEUNE ROAD
Name Address City-State-Zip: Title Name	BELCASTRO, PETER 1391 TIMBERLAKE MANOR PKWY CHESTERFIELD MO 63017-6058 SECRETARY MCMASTER, MEGHAN C	Name Address City-State-Zip: Title Name	GREGORCY, PHILIP 1391 TIMBERLAKE MANOR PKWY CHESTERFIELD MO 63017 DIRECTOR FERNANDEZ, ALEJANDRO 2655 S. LEJEUNE ROAD

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: MEGHAN C MCMASTER

SECRETARY

04/12/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date