FILED 2000 UNIFORM BUSINESS REPORT (UBR) May 20, 2000 8:00 am Secretary of State **DOCUMENT #821522** BUNGE CORPORATION 05-20-2000 90010 034 ***150.00 Mailing Address Principal Place of Business 11720 BORMAN DR. ····· BORMAN DR. ST. LOUIS MO 63146-4129 LOUIS MO 63146 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 13-4977260 Not Applicable \$8.75 Additional Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name UNITED STATES CORPORATION COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 Zip Code City FL 8. 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change Addition ☐ Delete TITLE TITLE ROEBUCK, KAREN D NAME NAME Zi Zi STREET ADDRESS 11720 BORMAN DR. STREET ADDRESS ST. LOUIS MO CITY-ST-ZIP CITY-ST-ZIP ☐ Addition PD ☐ Change ☐ Delete TITI F KLEIN, JOHN NAME NAME STREET ADDRESS 11720 BORMAN DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-7iP ST. LOUIS MO Change Addition ☐ Delete TITLE TITLE KERWIN, RICHARD G. NAME NAME STREET ADDRESS 11720 BORMAN DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST. LOUIS MO SVPD [] Change Addition TITLE ☐ Delete TITLE SCHARF, MICHAEL M. NAME 11720 BORMAN DR. STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ST. LOUIS MO ☐ Addition Change ☐ Delete TITLE TITLE BARKOFSKE, FRANCIS L NAME 11720 BORMAN DR. STREET ADDRESS STREET ADDRESS ST. LOUIS MO CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE THEBEAU, GREGORY L. NAME

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all sylicity like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURÉ:

11720 BORMAN DR.

ST. LOUIS MO

NAME STREET ADDRESS

CITY-ST-ZIP

SIGNATURE INDITITED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-27-200

314-994-6554

Daytime Phone #