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: UNITED AGENT GROUP INC. Account Name

Account Number : I20160000086 Phone : (561)508-5033 Fax Number : (561)694-1639

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REGISTERED AGENT CHANGE CARGILL AMERICAS, INC.

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AH 9:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.050	02, 607.1508, or 617.1508,	Florida Statutes, this	
statement of change is submitted for a corporation organing in order to change its registered office or regist	itzed under the laws of the ered agent, or both, in the	State of Delaware State of Florida.	-;-
1. The name of the corporation: Cargill Americas, In		·	
2. The principal office address: 2525 Ponce de Leo		Sables, FL 33134	
3. The mailing address (if different): 15407 McGinty	Rd W, Wayzata, MN	 √ 55391	
4. Date of incorporation/qualification: 08/20/2001	Document number:	F01000004401	
 The name and street address of the current registered a Florida Department of State: (If resigned, enter resigne 	gent and registered office of	on file with the	_
C T Corporation System	·	_	
1200 South Pine Island Road			
Plantation, FL 33324	_		2
6. The name and street address of the new registered agen (if changed):	t (if changed) and /or regis	stered office	40H 2202
United Agent Group Inc.		<u>.</u>	29
801 US Highway 1		,	AH
	NOT acceptable		ڢ
North Palm Beach, FL 33408		<u> </u>	8
The street address of its registered office and the street a as changed will be identical.	ddress of the business off	lice of its registered age	nt,
Such change was authorized by resolution duly adopted authorized by the board, or the corporation has been not	by its board of directors of fied in writing of the cha	or by an officer so nge.	
Rachel Joseph Signature of in process of director	Rachel Joseph, Atto	rney-in-Fact	_
hereby accept the appointment as registered agent and further agree to comply with the provisions of all status if my duties, and I am familiar with and accept the oblig locument is being filed merely to reflect a change in the corporation has been notified in writing of this change.	agree to act in this capac les relative to the proper c ation of my position as re registered office address,	zity. 2nd complete performa 22istered agent. Or, if t I hereby confirm that i	nce this the
Rachal Joseph Signature of Regulared Regul	11/29/2	2022	
f signing on behalf of an entity:	Date	·	_
Rachel Joseph, Special Secretary			
Typed or Printed Name			
* * * FILING FEE	: \$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)