FILED 2002 UNIFORM BUSINESS REPORT (UBR) Apr 30, 2002 8:00 am Secretary of State DOCUMENT # L0000000025 04-30-2002 90193 005 ****50.00 **BOUNTY LOGISTICS, LLC** Principal Place of Business Mailing Address 8550 NW 17TH STREET. SUITE 100 8550 NW 17TH STREET, SUITE 100 947897 MIAMI FL 33126 MIAMI FL 33126 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 65-0955723 Not Applicable Zip Country \$5.00 Additional Zip 5. Certificate of Status Desired Г Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SIGURD JENSEN CO Street Address (P.O. Box Number is Not Acceptable) 95 MERRICK WAY SUITE 518 CORAL GABLES FL 33134 City Zip Code 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. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State Due By May 1, 2002 ADDITIONS/CHANGES MANAGING MEMBERS/MANAGERS 10. MANAGING MEMBER Change TITLE ☐ Delete TITLE **BOUNTY GROUP HOLDING, LLC** NAME BOUNTY GROWP HOLDING, LLC NAME 8550 NW 17TH STREET, SUITE 100 8550 NW 17TH STREET, SUITE 410 /00 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 33126 **MIAMI FL 33126** Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change - Addition 🗢 🛶 🖃 Delete 🚟 ~TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ■ Addition TITLE ☐ Change TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP

SIGNATURE:

11. 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 feport is true and accurate and that my 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 price receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.