

**L06000088220**

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC  
Account Number : 110432003053  
Phone : (561)694-8107  
Fax Number : (561)694-1639

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

**LLC REGISTERED AGENT CHANGE  
IBIS ETHANOL, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

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2013 JUL 26 AM 8:21

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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY**

*Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

1. Name of the limited liability company: IBIS ETHANOL, LLC

2. (a) Principal office address of limited liability company: 111 PONCE DE LEON AVENUE  
CLEWISTON, FL 33440  
**(Note: MUST BE STREET ADDRESS)**

(b) Mailing address of limited liability company: 111 PONCE DE LEON AVENUE  
CLEWISTON, FL 33440  
**(Note: MAY BE POST OFFICE BOX)**

09/07/2008 effective: 09/08/2008

3. Date of filing/registration in Florida

L06000088220

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

BERNARD, GERARD A

Registered Office Address:

111 PONCE DE LEON AVENUE  
CLEWISTON, FL 33440

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW Registered Agent:**

EDWARD ALMEIDA

**NEW Registered Office Address:**

**(MUST BE FLORIDA STREET ADDRESS)**

111 PONCE DE LEON AVENUE  
CLEWISTON FL 33440

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Kristine Roy, Attorney-in-Fact  
Printed or typed name of signer

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

Signature of Registered Agent

Kristine Roy, Attorney-in-Fact

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314  
FILING FEE: \$25.00

INHS18 (01-08)

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