

Division of Corporations

Page 1 of 2

L10000254716

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000209190 3)))



H180002091903ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : HARVARD BUSINESS SERVICES, INC.
Account Number : 120080003045
Phone : (302) 645-7400
Fax Number : (302) 645-1280

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

Email Address: MariaJose.Cabazon@jtcgroup.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
AGROCONSOLIDATED, LLC

| | |
|-----------------------|---------|
| Certificate of Status | 1 |
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$30.00 |

Electronic Filing Menu

Corporate Filing Menu

Help

RECEIVED
2018 JUL 19 PM 1:12

AGROCONSOLIDATED, LLC
JUL 19 2018

FILED
2018 JUL 19 A 6:45
HBS Filings Fax

7/20/18 DS

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AGROCONSOLIDATED, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 03/08/2010

and assigned

Florida document number L10000025476

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Registered Agents Inc.

New Registered Office Address:

3030 N. Rocky Point Dr., STE 150A

Enter Florida street address

Tampa

, Florida 33607

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 605, 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.

Bill Hume

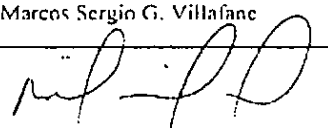
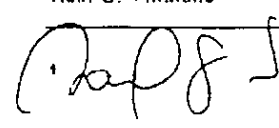
If Changing Registered Agent, Signature of New Registered Agent

18 JUL 29 50:23

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

| Title | Name | Address | Type of Action |
|-------|---|---|---|
| MGR | Marcos Sergio G. Villafane  | 4134 SW 47TH COURT OCALA, FL 34474 | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change |
| MGR | Raul G. Villafane  | 4134 SW 47TH COURT OCALA, FL 34474 | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change |
| MGR | Patagonia Lakes Ltd | 30 Main Street, P.O. Box 3200 Road Town, Tortola VG1110, British Virgin Island | <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change |

18 JUL 12 9:50:28

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

18 JUL 12 9:50:34

E. Effective date, if other than the date of filing: _____ (optional)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated. 07-12-18

Миркоз Бом Сает

Signature of a member or authorized representative of a member

Marcos Sergio Gori Saez, Director of Patagonia Lakes Ltd

Typed or printed name of signee