

L10000065884

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(Address)

(Address)

(City/State/Zip/Phone #)

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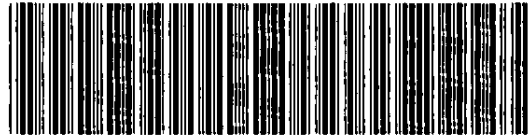
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10 JUL -1 AM 11:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Cullen JUL 2 - 2010

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AFRILOG USA, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Articles of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lisa Y. Shorts-Pitell

Name of Person

Pitell Law Firm, PL

Firm/Company

PO Box 5148

Address

Niceville, FL 32578

City/State and Zip Code

edelange@afrilog.us

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lisa Y. Shorts Pitell, Attorney

Name of Person

at (850)

897-0045

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☒ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

CR2E062 (08/05)

**ARTICLES OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

FILED

10 JUL -1 AM 11:26

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida. SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FIRST: The name of the limited liability company is:
AFRILOG USA, LLC

SECOND: The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)



Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

The name of the Registered Agent of the Company (Article IV) and the name
of the Manager of the Company (Article V) is:


Maria C. De Lange

OR



Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Dated: June 28, 2010



Signature of a member or authorized representative of a member

Lisa Y. Shorts Pitell, Attorney

Typed or printed name of signee

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L10000065884
FILED 8:00 AM
June 21, 2010
Sec. Of State
nculligan

Article I

The name of the Limited Liability Company is:
AFRILOG USA, LLC

Article II

The street address of the principal office of the Limited Liability Company is:
422 FOX LANE
HOLT, FL. 32564

The mailing address of the Limited Liability Company is:
P.O. BOX 23
HOLT, FL. 32564

Article III

The purpose for which this Limited Liability Company is organized is:
ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:
MARIE C DE LANGE
422 FOX LANE
HOLT, FL. 32564

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: MARIE C. DE LANGE

Article V

The name and address of managing members/managers are:

Title: MGR
MARIE C DE LANGE
P.O. BOX 23
HOLT, FL. 32564

L10000065884
FILED 8:00 AM
June 21, 2010
Sec. Of State
nculligan

Signature of member or an authorized representative of a member

Signature: LISA Y. SHORTS PITELL