113000/6347/

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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09/26/14--01002--011 **25.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

OCT 09 2014 T. CARTER



COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: BIONITROGEN PLANT FL HEN	IDRY, LLC		
(Name of Limited I	iability Company)		
The enclosed member, resignation or dissociation	and fee(s) are submitted for filing.		
Please return all correspondence concerning this	matter to:		
Fredy Pedroza			
(Contact Person)			
Bionitrogen Plant FL Hendry, LLC			
(Firm/Company)			
1400 Centrepark Blvd Suite 860			
(Address)			
West Palm Beach, FL 33401			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
Fredy Pedroza	786 326-3357		
(Name of Contact Person)	Area Code & Daytime Telephone Number)		
Enclosed please find a check made payable to the Florida Department of State for: ■ \$25 Filing Fee			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Tallahassee, Florida 32301			

CR2E079 (2/14)



FILED SECRETARY OF STATE TALLAHASSEE FLORIDA

14 SEP 26 PM 4: 14

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

1. The name of the	limited liability company as it appears on the records of the Florida Department
of State is: BIO	NITROGEN PLANT FL HENDRY, LLC
2. The Florida docs	ment/registration number assigned to this limited liability company is:
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is:
MANAGER	
	Print Title)
of this limited lia resignation in wr	oility company and affirm the limited liability company has been notified of my ting.
By	Soul
Signature of Di	ssociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)