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COVER LETTER

TO:				
SHR	ARGO:	LAND US, LLC		
SOD	JEC I.	Name of Lim	ited Liability Company	
The e	enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Pleas	e return all corre	spondence concerning this matter	to the following:	
	Division of Corporations ARGO LAND US, LLC Name of Limited Liability Company enclosed Articles of Amendment and fee(s) are submitted for filing. se return all correspondence concerning this matter to the following: Jennifer A. Cachon Name of Person Conroy, Conroy & Durant, P.A. Firm/Company 2210 Vanderbilt Beach Road, Suite 1201 Address Naples, FL 34109 City/State and Zip Code jeachon@naplespropertylaw.com E-mail address: (to be used for future annual report notification) further information concerning this matter, please call: nifer A. Cachon Name of Person Area Code Daytime Telephone Number losed is a check for the following amount: \$25.00 Filling Fee \$55.00 Filling Fee \$			
		NAME OF Limited Liability Company Tamendment and fee(s) are submitted for filing. Sondence concerning this matter to the following: Jennifer A. Cachon Name of Person Conroy, Conroy & Durant, P.A. Firm/Company 2210 Vanderbilt Beach Road, Suite 1201 Address Naples, FL 34109 City/State and Zip Code jcachon@naplespropertylaw.com E-mail address: (to be used for future annual report notification) concerning this matter, please call: at (239 Area Code Daytime Telephone Number the following amount:		
		Conroy, Conroy & Durant	Name of Limited Liability Company ment and fee(s) are submitted for filing. concerning this matter to the following: mifer A. Cachon Name of Person roy, Conroy & Durant, P.A. Firm/Company 0 Vanderbilt Beach Road, Suite 1201 Address les, FL 34109 City/State and Zip Code on@naplespropertylaw.com E-mail address: (to be used for future annual report notification) og this matter, please call: at (239	
			Firm/Company	
		2210 Vanderbilt Beach Ro	ad, Suite 1201	
		Jennifer A. Cachon Name of Person Conroy, Conroy & Durant, P.A. Firm/Company 2210 Vanderbilt Beach Road, Suite 1201 Address Naples, FL 34109 City/State and Zip Code jcachon@naplespropertylaw.com E-mail address: (to be used for future annual report notification) oncerning this matter, please call:		
		Naples, FL 34109		
			City/State and Zip Code	
			•	ication)
For fu	arther informatio	n concerning this matter, please co	all:	
Jenni	ifer A. Cachon			
	Nam	e of Person	Area Code Daytime	: Telephone Number
Enclo	sed is a check fo	r the following amount:		
■ \$2	25.00 Filing Fee	□ \$30.00 Filing Fec & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



ARGO LAND US, LLC

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

	were filed on 09/12/2014	and assigned		
Florida document number L14000143221				
This amendment is submitted to amend the following:				
Florida document number L14000143221 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:				
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC"	or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:		West 1 to 1		
(Principal office address MUST BE A STREET ADDRESS)	,			
Enter now mailing address if annicables				
• • •				
(Mailing address MAY BE A POST OFFICE BOX)	- 1-2	ecords, enter the name of the new		
		enter the name of the nev		
registered agent and/or the new registered office address her	<u>re</u> :			
Name of New Projetowal Auent				
Name of New Negisleted Agent.				
New Registered Office Address:	P + Pl (d			
	Enter Pioriaa street address			
white the state of				
	City	Zip Code		
Million Front Commit A months (Name against 16 also makes 13 animates 4 America	_			

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.

If Changing Registered Agent, Signature of New Registered Agent

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Scott Bland	21141 BELLA TERRA BLVD.	■ Add
		ESTERO, FL 33928	□ Remove
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Signature of a member or authorized representative of a member		ner			2015							
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Filing Fee: \$25.00