

L16000013309

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

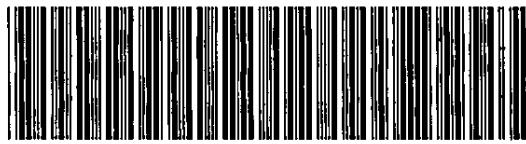
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200286039322

05/23/16--01053--011    \*\*25.00

FILED  
MAY 23 A 9:05  
RECESSIONARY OF STATE  
FLORIDA

MAY 26 2016

SWARZEN

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **AGROESCO TRADE LLC**

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

**HERNANDO ARANGO**

Name of Person

Firm/Company

**2500 NW 79 AVE SUITE 216**

Address

**DORAL, FL 33122**

City/State and Zip Code

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

For further information concerning this matter, please call:

**HERNANDO ARANGO**

Name of Person

**786 319.9603**

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

\$30.00 Filing Fee &  
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



If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

**MGR = Manager**

**AMBR = Authorized Member**

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGR</u>	<u>AGROESCO, C.A.</u>	<u>CARRERA 63B NRO. 32E-25, NO. 209</u>	<input type="checkbox"/> Add

MEDELLIN, AN 00000 CO  Remove

<u>MGR</u>	<u>AGROESCO S.A.S.</u>	<u>CARRERA 63B NRO. 32E-25, NO. 209</u>	<input type="checkbox"/> Add
		<u>MEDELLIN, AN 00000 CO</u>	<input type="checkbox"/> Remove

<u>D</u>	<u>HERNANDO ARANGO</u>	<u>2500 NW 79 AVE #216</u>	<input checked="" type="checkbox"/> Add
		<u>DORAL, FL 33122</u>	<input type="checkbox"/> Remove

Add

Remove

Add

Remove

201 MAY 23 2005  
NOTARY OF STATE  
DUVAL COUNTY, FLORIDA  
 Add  
 Remove

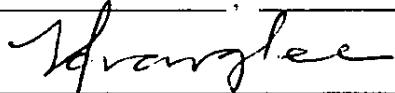
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A

E. Effective date, if other than the date of filing: N/A (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 04/29, 2016



Signature of a member or authorized representative of a member

HERNANDO ARANGO

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

RECEIVED MAY 23 A 4 05  
ATTORNEY GENERAL  
FLORIDA

FILED