

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000004546

FILED  
Feb 17, 2011  
Secretary of State

Entity Name: AMYRIS FUELS, LLC

**Current Principal Place of Business:**

5885 HOLLIS ST  
STE 100  
EMERYVILLE, CA 94608

**New Principal Place of Business:**

**Current Mailing Address:**

5885 HOLLIS ST  
STE 100  
EMERYVILLE, CA 94608

**New Mailing Address:**

FEI Number: 26-3568490

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NATIONAL REGISTERED AGENTS, INC.  
2731 EXECUTIVE PARK DR  
STE 4  
WESTON, FL 33331 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MELO, JOHN  
Address: 5885 HOLLIS ST - STE 100  
City-St-Zip: EMERYVILLE, CA 94608

Title: PRES  
Name: ALDERMAN, JIM  
Address: 5885 HOLLIS ST - STE 100  
City-St-Zip: EMERYVILLE, CA 94608

Title: SECT  
Name: TOMPKINS, TAMARA  
Address: 5885 HOLLIS ST - STE 100  
City-St-Zip: EMERYVILLE, CA 94608

Title: CFO  
Name: HILLEMANN, JERYL  
Address: 5885 HOLLIS ST - STE 100  
City-St-Zip: EMERYVILLE, CA 94608

Title: ASST  
Name: JAENIKE, CHRIS  
Address: 5885 HOLLIS ST - STE 100  
City-St-Zip: EMERYVILLE, CA 94608

Title: ASST  
Name: KRIVAS, THOMAS  
Address: 5885 HOLLIS ST - STE 100  
City-St-Zip: EMERYVILLE, CA 94608

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOHN MELO

MGRM

02/17/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date