## M0900004389

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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscglobal.com

Date: November 30, 2016

Order#: 363010-011

Re: ADVANCED NUTRIENTS US LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Janis M. Smith c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Na	me of the limited liability company:	ADVANCED NU	TRIENT	S US LLC	
2	(a)	1625 HERITAGE STREET UNIT 104		_ (b)	i	
	( <b>u</b> ) .	Principal office address of limited liabi (Note: MUST BE STREET AD		_ (0)	N	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
		Woodland, WA	98674	_		
		11/05/2009		_	M0900000	
3.		Date of filing/registration in F	Horida	4.		Document number
5.	(a)	NRAI SERVICES, INC				
		Registered Agent and Registered Office shown	on the records of th	e Florida	Dept. of State	:
		1200 SOUTH PINE ISLAND ROAD				
		Registered Office Address (MUST BE FLO	ORIDA STREET AL	DDRESS)		
						<b>₩</b> 1
		PLANTATION	, FL_	33324		16 DE
<i>(</i>	(b)	Corporation Service Company				
	(-)	Enter name of NEW Registered Agent and/or	NEW Registered C	Office add	ress:	SSEE SSEE
		4004 Have Observe				
		1201 Hays Street  NEW Registered Office Address:				DRING &
						<b>5 9</b>
		Tallahassee	, FL_	32301		
the age	cha ent w s/we	vill be identical. Or, in the case of a FI re authorized by an affirmative vote of cles of organization or the operating ag	reet address of to orida limited liab the members of	he regis bility con the limi	tered office mpany, it is ted liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
	Signat	ure of a member or authorized representative of	a member	Jill C		rized Person Printed or typed name of signee
1 h pro the to no	nerel ovisio obli mere tified	ov accept the appointment as registered	l agent and agre r and complete p gent as provided fice address, I he	performa for in C ereby co	in this capa nce of my a hapter 605, nfirm that t	icity. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been by, Assistant Vice President
	`		• •			

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	lame of the limited liability company: ADVANCED 1	NUTRIENTS US L	LC
2. (a)	1625 HERITAGE STREET UNIT 104	(b)	
z. (u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(6)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Woodland, WA 98674		
	11/05/2009	M090	000004389
3.	Date of filing/registration in Florida	4.	Document number
5. (a	) NRAI SERVICES, INC		
J. (u	Registered Agent and Registered Office shown on the records of	of the Florida Dept. of	f State:
	1200 SOUTH PINE ISLAND ROAD		
	Registered Office Address (MUST BE FLORIDA STREET	T ADDRESS)	
	***************************************	<del></del>	
	PLANTATION , F	FL 33324	
(b)	Corporation Service Company		DEC AHAA
	Enter name of NEW Registered Agent and/or NEW Registered	ed Office address:	38S - 2
	1201 Hays Street		
	NEW Registered Office Address:		ORDA
	Tallahassee . F	FL 32301	
	*		<del></del>
the chagent was/v	limited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	of the registered of liability company s of the limited lia ne limited liability	office and the business office of the registered it is hereby confirmed that the change(s) bility company or as otherwise provided in company.
Sign	nature of a member or authorized representative of a member	JIII CIIMI, A	uthorized Person Printed or typed name of signee
I her provi the ol to me	eby accept the appointment as registered agent and a sions of all statutes relative to the proper and comple bligations of my position as registered agent as provide rely reflect a change in the registered office address, ed in writing of this change.	gree to act in this le performance of ded for in Chapter I hereby confirm	canacity. I further garee to comply with the
Signa	ture of Registered Agent Corporation Service Company	BY: Grace E	Kirby, Assistant Vice President