M11000003112

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DATE:

8/11/14

NAME: E D & F MAN LIQUID PRODUCTS LLC

TYPE OF FILING: CHANGE OF AGENT

COST:

25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

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

Pursuant to the provisions of sections 605.0114, 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. Name of the limited liability company: ED&FMAN	LIQUID PRODUCTS LLC	· · · · · · · · · · · · · · · · · · ·
2. (a) Principal office address of limited liability company	365 Canal Street, Suite 2929	
(Note: MUST BE STREET ADDRESS)	New Orleans, LA 70130	
	THE CHICAGO AND ADDRESS OF THE CONTRACTOR AND ADDRESS OF THE CONTRACTOR ADDRESS OF THE CONTRACTO	
(b) Mailing address of limited liability company:		
(Note: MAY BE POST OFFICE BOX)		· <u>ِ لاَن</u>
June 13, 2011	M11000003112	32
3. Date of filing/registration in Florida	 Document number 	က္
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept	, of State: 23
Registered Agent:	CT Corporation System	
Registered Office Address:	1200 South Pine Island Road	
	1200 South Pine Island Road	
	Plantation, FL 33324	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u> <u>NEW</u> Registered Agent:	National Corporate Research	
NEW Desistant Office A James	155 Office Plaza Drive	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	155 Office Plaza Drive	
,	Tallanasseo	,[FL_32301
If the limited liability company is not organized under the l confirmed that after the change or changes are made, the FI and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwise the operating agreement of the limited liability company.	orida street address of the regical. Or, in the case of a Floric was/were authorized by an aft	istered office da limited firmative vote of
Signature of a member or authorized representative of a member	_	
Arthur W. Huguley, IV	_	
Printed or typed name of signee	_	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pre and I am familiar with and accept the obligations of my pochapter 605, F.S. Or, if this document is being filed to me address, Thereby confirm that the limited liability company	gree to act in this capacity. I per and complete performanc sition as registered agent as perely reflect a change in the reg thas been notified in writing o	further agree to te of my duties, rovided for in gistered office of this change,
Signature of Registered Agent Lucy Rose, Assistant Secretary		
Division of Corporations, P.O. Box 63	27. Tallahassee, FL, 32314	
(/ FILING FEE: S2		
INIISI8 (12/13)		