

(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	y/State/Zip/Phone	→ #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nar	ne)	
(Do	cument Number)		
Certified Copies Certificates of Status			
Special Instructions to	Filing Officer:		

Office Use Only



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MAY 22 2014

R. WHITE



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Anthony Holmes aholmes1@cscinfo.com

Date: May 8, 2014

Order#: 124844-002

Re: IXE AGRO USA LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

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: Anthony Holmes

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.

2. (a)		(b)	1				
z. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)		Mailing address of limited (Note: MAY BE POST	•		
	9960 NW 116th Way, Suite 8		9960 N	IW 116th Way, Suite 8			
	Miami, FL 33178		_Miami,	FL 33178			
	11/07/2013		M1300	0007083			
3.	Date of filing/registration in Florida	4.		Document number			
5. (a)	Sasigado, William						
J. (α)	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of S	itale:			
	Registered Office Address (MUST BE FLORIDA STREET.	ADDRESS;]	•	2 40		
	200 SW 1st Ave., #840				1774. 27-17	<u> </u>	
	Ft. Lauderdale , FI	33301			55	11 12	~· -
<i>(</i> L)	Corporation Service Company						
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office ado	iress:	•	<u> </u>	ķģ.	٠.
						လ က်	
	1201 Hays Street				3≥ r:		
	NEW Registered Office Address:			****			
	Tallahassee , FI	32301					
					C 1.1	6	
If the the	limited liability company is not organized under the la ange or changes are made, the Florida street address o	ws of the f the regis	State of stered of:	Florida, it is hereby coi fice and the business of	fice of the	at after registe	ered
agent	will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members	iability co	impany,	it is hereby confirmed t	hat the ch	ange(s))
the art	ticles of organization or the operating agreement of the	limited l	iability o	company.	., w.20 p. 0	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Cina	nture of a member of authorized representative of a member	ALE	JANDR	O GARCIA, Author Printed or typed name of	ized Pe	ersor	
•	11 1	ree to act	in this c		_	ly with	the
provis the ob to mei notifie	eby accept the appointment as registered agent and ag cions of all statutes relative to the proper and complete digations of my position as registered agent as provide rely reflect a change in the registered office address, I ed in writing of this change.	e perform ed for in (hereby co	ance.oj i Ihapter (onfirm th	ny duties, and I am fam 605, F.S. Or, if this doc nat the limited liability o	iliar with cument is i company h	ana ac being fi ias bee	cept ìled n
1							
1 Sept.	Arthregister Agen Corporation Service Company	BY: S	vlvia Oi	neppet, Assistant Vice	Pr e sdier	nt .	

FILING FEE: \$25.00