Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BTG PACTUAL COMMODITIES (US) LLC

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MAY 1 1 2016

J SHIVERS

8506176383(2/5) 5/10/2016 12:21:59 PM From: To:

COVER LETTER

Registration Section
Division of Corporations TO:

SUBJECT: BTG Pactual Commodities (US) LLC Name of Foreign Limited Liability Company						
Dear Sir or Madam:						
The enclosed application, certificate and fee	e(s) are submitted for filing.					
Please return all correspondence concerning	g this matter to the following:					
Name of Person						
Firm/Company						
Address						
City/State and Zip (Code					
Commodities-Notices-US@ECTP.com E-mail address: (to be used for future an	nual report notification)					
For further information concerning this ma	tter, please call:					
Name of Person	at () Area Code & Daytime Telephone Number					
Traine of Follows	The Source Sayana Perspical President					
STREET/COURIER ADDRESS Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314					
Enclosed is a check for the following am □ \$25 Filing Fee □ \$30 Filing Fee & Certificate of St CR2E055 (12/14)	\$55 Filing Fee & \$60 Filing Fee,					

5/10/2016 12:21:59 PM From: To: 8506176383(3/5)

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Compan	y as it appears on the records of the Florida I	epartment of
State: BTG Pactual Commodities (US)	LLC	
2. The Florida document number of this l	imited liability company is: M14000001291	
3. Jurisdiction of its organization: Delawa	are	
4. Date authorized to do business in Flor	ida: <u>02/25/2014</u>	·
SECTION II (5-9 complete only the ap	plicable changes)	
5. New name of the limited liability com	pany: Engelhart CTP (US) LLC (must contain "Limited Liability Company, ""L.L.	C.," or "LLC.")
	the purpose of transacting business in Florida and attach a cang the alternate name. The alternate name must contain "Lin	
6. If amending the registered agent and/or the new registered agent ag	r registered office address on our records, entregistered office address here:	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida Street Address	
	, Florida	22 2
	Cin. , Florida	Zip Code
comply with the provisions of all statutes duties, and I am familiar with and accept provided for in Chapter 605, F.S. Or, if t	anging Registered Agent: tered agent and agree to act in this capacity, s relative to the proper and complete perform t the obligations of my position as registered this document is being filed to merely reflect to that the limited liability company has been	ance of my agent as a change in the
7. If the amendment changes the jurisdic	If Changing Registered Agent, Signature of New Registered Agent ction of organization, indicate new jurisdiction	n:

Title/ Capacity	<u>Name</u>	A	<u>ddress</u>	Type of Action
				Reniove
				□ Add
				☐ Remove
				☐ Add
				□ Remove
				Add:
				Remove }
				☐ Remove
aforementione	d amendment(s), duly der the law of which	no more than 90 days old, authenticated by the officithis entity is organized.	ial having custo	

Filing Fee: \$25.00



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "BTG PACTUAL COMMODITIES (US) LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "ENGELHART CTP (US) LLC" ON THE THIRD DAY OF MAY, A.D. 2016, AT 6:32 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF AMENDMENT IS THE NINTH DAY OF MAY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

Authentication: 202290981

Date: 05-10-16

5355834 8320 SR# 20163013809