2000 UNIFORM BUSINESS REPORT (UBR) FILED Mar 24, 2000 8:00 am Secretary of State **DOCUMENT # M17400** 1. Entity Name COMMERCEBANK HOLDING CORPORATION 03-24-2000 90113 011 ***150.00 Principal Place of Business Mailing Address % CORPORATION COMPANY OF MIAMI % CORPORATION COMPANY OF MIAM! 220 ALHAMBRA CIRCLE 220 ALHAMBRA CIRCLE CORAL GABLES FL 33134 CORAL GABLES FL 33134-5174 Francisco and an 3. Mailing Address 2. Principal Place of Business 34 × 6 3 Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0032379 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATION COMPANY OF MIAMI Street Address (P.O. Box Number is Not Acceptable) 1500 EDWARD BALL BUILDING 100 CHOPIN PLAZA **MIAMI FL 33131** Zip Code FL 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. 🛂 Change Addition TITLE ☐ Delete TITLE VILLAR, GUILLERMO NAME NAME 220ALHAMBRA CIRCLE STREET ADDRESS STREET ADDRESS 6200 RIVIERA DRIVE CORAL GABLES, FL 33134 CITY-ST-ZIP CITY-ST-ZIP CORAL GABLES FL Addition PST ☐ Delete TITLE Change TITLE NAME WILSON, MILLAR NAME 1307 CAMPO SANO AVENUE STREET ADDRESS STREET ADDRESS 5950 SW 135 TERR. CORAL GABLES, FL 33146-1165 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL Change Addition TITLE -- -- --Delete . TITLE MARTURET, GUSTAVO NAME NAME STREET ADDRESS STREET ADDRESS CALLE OTAMA #15 URB VALL CITY-ST-ZIP CITY-ST-ZIP CARACAS, VENEZUELA ☐ Change ☐ Addition ☐ Delete TITLE TITLE RODRIGUEZ ALFREDO NAME NAME STREET ADDRESS STREET ADDRESS **AVE PRINCIPAL NARANJOS 2** CITY-ST-ZIP CITY-ST-7IE CARACAS 1011, VENEZUEL D DIEGO ARNAL CALLE J QTA TANGO SANTA ROSA DE LIMA, CARACAS

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

VENEZUELA

Delete

☐ Delete

NAME OF SIGNING OFFICER OR DIRECTOR

and allerstable Chare

SIGNATURE:

SINTES, GUSTAVO

LEIROS, ARMANDO

AVE ANDRES BELLO

CARACAS, VENEZUELA

BOGOTA CO

BANCO MERCANTIL, COLOMBIA

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

460

☐ Change

☐ Addition