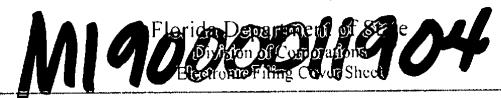
6/1/2020

Division of Corporations



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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BLUE MARBLE AGBIO, LLC

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JUN 02 2020

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

2020 JUH - 1 AHTH: 36

## SECTION I (1-4 must be completed)

<ol> <li>Name of limited liability Company as it appear</li> </ol>	s on the records of the Florida I	Department of
State: Blue Marble Agbio, LLC		
Enter new principal office address, if applicable:	1881 Grove Avenue	
	Radford VA 24141	
( <u>Principal office address</u> MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
2. The Florida document number of this limited lic	· · · · · · · · · · · · · · · · · · ·	904
Jurisdiction of its organization:  DE		
4. Date authorized to do business in Florida: $\frac{12/1}{1}$		
SECTION II (5-9 complete only the applicable		
5. New name of the limited liability company: $\underline{\underline{G}}$ (must	reenVenus, LLC st contain "Limited Liability Co	ompany, " "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or ma must contain "Limited Liability Company," "L.I.,	maging members adopting the a	business in Florida and attach a alternate name. The alternate name
6. If amending the registered agent and/or register registered agent and/or the new registered office a	red officer address on our record	ds. enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florid	da Street Address
		Florida
_	City	, Florida Zip Code
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered age the provisions of all statutes relative to the proper and accept the obligations of my position as regis document is being filed to merely reflect a change liability company has been notified in writing of the company has been notified in writing the company has been notified in writi	ent and agree to act in this cape, r and complete performance of stered agent as provided for in ( e in the registered office addres, his change.	my duties, and Fam familiar with Chapter 605, F.S. Or, if this s, I hereby confirm that the limited
167	Changing Registered Avent. Sic	mature of New Registered Agent

2020 المائة على المائة						
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aforementioned ar	ficate, if required: no more than 90 day mendment(s), duly authenticated by the the law of which this entity is organize	official having custody of records in	□Rcmo			
	Kimberly Bowens Signature of the	authorized representative				
	Kimberly Bowens  Typed or printed					

Filing Fee: \$25.00



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID BLUE MARBLE AGBIO, LLC', FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "GREENVENUS, LLC" ON THE TWENTY-FOURTH DAY OF FEBRUARY, A.D. 2020, AT 11:23 O'CLOCK A.M.



7711464 8320 SR# 20205198496 Authentication: 203016943

Date: 05-29-20