2000 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # 829527** 1. Entity Name CARGILL FERTILIZER, INC. Principal Place of Business Mailing Address 8813 HIGHWAY 41 SOUTH P.O. BOX 5626 MS 26

FILED Mar 30, 2000 8:00 am Secretary of State 03-30-2000 90109 024 ****61.25

RIVERVIEW FL 33569 US			MINNEAPOLIS MN 55440-5626			1 1 451\$ 1	 Iniin iinin inin aniin ailii iinii iinii iinii ii	11011 31012 01011 B10		
2. Principal P	Place of Busin	ess	3. Mailing Address							
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THI	S SPACE		
City & State	e		City & State			4. FEI Number 59-1445393 Applied For Not Applicable				
Zip	Zip Country		Zip	Country		5. Certificate of Status Desired See Required \$8.75 Additional Fee Required				
	6. Name	and Address of Current F	legistered Agent	gistered Agent		7. Name and Address of New Registered Agent				
1200 SOU		AND ROAD		Street Address ((P.O. Box Number is Not Acceptable)				
PLANTATIO	ON FL 3332	4	City			FL Zip Code				
8. The above SIGNATURE	named entity	submits this statement for	the purpose of changing its r	egistered office	or register	ed agent, or bo				
Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) DATE										
FILE NOW: FEE IS \$61.25						.00 May Be Make Check F Department				
10.		OFFICERS AND DIR	ECTORS	11.		ADDITIONS/CH	HANGES TO OFFICERS AND	DIRECTORS IN	10	
TITLE NAME		I, FREDRIC W. GINTY ROAD MN 55301	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		CEO		▼ Change	Addition	
TITLE NAME	DP RAYMOND	R. LARSON 41 SOUTH	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		President		[X] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GORDON, 8813 HWY RIVERVIEW	41 SOUTH	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Senior	Vice President	🗓 Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VST LEFOR, GF 8813 HWY RIVERVIEW	REG A 41 SOUTH	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	٧	PATRICE H GINTY RD.	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		_		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby of	AS ANNE E. C 15615 MCC WAYZATA	ARLSON GINTY RD.W. MN 55391	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP the exemption st	Lund 1540 Wayz	stant Seleen, Lil 7 McGint ata, MN	llian I. cy Rd	Change	★ Addition ★ Addition ★ Addition ★ Addition	

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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

612-742-6406