# F01000000636

# TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	•			
SUBJECT: Quality Co	ttonseed,	Incorporate	ed -	- <u></u>
	orporation - mus	t include suffix)		
Dear Sir or Madam:		*		÷
The enclosed "Application by Foreign Corpor "Certificate of Existence", and check are submoto transact business in Florida.				
Please return all correspondence concerning the	is matter to the i	following:		
Andy Borem				
(	Name of Person)	7'01	00035563 -01/22/0101	357- <u>-</u> 9
Chickasha of Geo:				******70.00
(	Firm/Company)		1	E05
P O Box 1927		- ·	wo1-1	383
	(Address)			
Tifton, Georgia	31793		and the second	
	y/State and Zip	code)		····
For further information concerning this matter,	please call:			
Andy Boremat (		88-8008	· · · · · ·	
(Name of Person)  STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399  Enclosed is a check for the following amount:	MAIL Registr Divisio P.O. B Tallaha	ING ADDRESS: ation Section in of Corporations ox 6327 assee, FL 32314	OO JAN 31 M 2: 24 SECRETARY OF STATE TALLAHASSEE, FLORIDA	FLED
\$70.00 Filing Fee Sectificate of State		Filing Fee &   d Copy	\$87.50 Filing Fee, Certificate of State Certified Copy	us &2 //



#### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

January 22, 2001

ANDY BOREM PO BOX 1927 TIFTON, GA 31793

SUBJECT: QUALITY COTTONSEED, INC.

Ref. Number: W01000001585

We have received your document for QUALITY COTTONSEED, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the street address of each officer/director.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6097.

Michael Mays Document Specialist

Letter Number: 201A000034

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### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)  2	· · · · · · · · · · · · · · · · · · ·
natural person or partnership if not so contained in the name at present.)	
• • •	
2. Georgia 3. 58-2012492  (State or country under the law of which it is incorporated)	
(State or country under the law of which it is incorporated)	
(1 Li hathout, it applicable)	
4	
(Date of incorporation) (Duration: Year corp. will cease to exist or "pe	erpetual")
. Unon qualification	- ,
6. Upon qualification	<u> </u>
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon quali (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	ification.")
(SEE SECTIONS 007.1301, 007.1302 and 617.133, F.S.)	
7. 109 Jordan Road, Tifton, Georgia 31794	-
(Principal office address)	<del></del>
P O Box 1927, Tifton, Georgia 31793	<u>.</u>
(Current mailing address)	
8. Purchase and sale of agricultural products	0
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	<del></del>
	<u> </u>
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable	le)≝ <u>T</u> 1
	<u>3</u> [
Name: Cloverleaf Gin, Inc.	
Office Address: Box 4455, Hwy 162 West	
Office Address: Box 4455, Hwy 162 West	
Marianna Florida 32446	2
rigit talling Highing 34440 Fig.	· <del>_</del>
(City) (Zip cde)	—

#### 10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

# 12. Names and business addresses of officers and/or directors:

A. DIRECTOI	RS	
Chairman:	Wendell Dunaway	<u> </u>
Address:	P O Box 1007 or 300 North Houston Street	· 
	Hawkinsville, Georgia 31036	
Vice Chairman: _	Sonny Davis	
Address:	3806 Old Hickory Pond Road	
<u> </u>	Conttondale, Florida 32431	
Secretary:	Van Murphy	
Address:	Route 1 Box 219	
	Quitman, Georgia 31643	
Director:		
B. OFFICERS		<u> </u>
President:	TAT SE	
Vice President:	Ho M	<del>==</del>
	24 PA	<u>.</u>
Secretary:		
Address:		<u>an</u> Alaska in Alaska
		=° ',±= T
		_ : <u></u>
<del></del>		<u></u>
NOTE: If necess	sary, you may attach an addendum to the application listing additional officers and/or directors.	
13. <u>/////</u>	manday	
	Signature of Chauman, Vice Chairman, or any officer listed in number 12 of the application)	<u> </u>
14. <u>Wende</u>	11 Dunaway, Chairman	- TE .
	(Typed or printed name and capacity of person signing application)	

# 12. Names and business addresses of officers and/or directors:

A. DIK	ECTORS	
-	Dan Ellis	
Address:	410 E. Broad St	
	Eufaula, Alabama 36027	
	Tim Floyd	
Address:	P O Box 18 or 2173 US Hwy 41 South	
_	Sycamore, Georgia 31790	
Director:	Grant Gainer	-
Address:	P_O Box_1269 or 21 Broxton Hwy	
	Hazelhurst, Georgia 31539	
Director:	Fred Powell	
Address:	P O Box 759 or 19 Kinard Bridge Road	
	Lenox, Georgia 31637	

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SECRETARY OF STATE

# 12. Names and business addresses of officers and/or directors:

A. DIRECTOR	'n.
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	Hugh Roberts		<u>.</u>
Address:	P O Box 605 or South Side		
	Ocilla, Georgia 31774		
	Lavon Stripling	<u> </u>	
Address:	Rt 5 Box 3023	- · · · · · · · · · · · · · · · · · · ·	
	Moultrie, Georgia 31768		
Director:			
Address:			
			—————————————————————————————————————
Director:		- 14.4. 1111 - 1	<u> </u>
Address:	<u> </u>		ap B the state of

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SECRETARY OF STATE

OF STATE

# Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

DOCKET NUMBER : 010080214 CONTROL NUMBER CONTROL NUMBER : K214733

DATE INC/AUTH/FILED: 07/24/1992

JURISDICTION : GEORGIA

PRINT DATE : 01/08/2001

FORM NUMBER : 211

QUALITY COTTONSEED, INC.

P O BOX 1007 HAWKINSVILLE, GA 31793

#### CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

#### QUALITY COTTONSEED, INC. A DOMESTIC PROFIT CORPORATION

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State. 

This certificate relates only to the legal existence of the abovenamed entity as of the date issued. It does not certifi whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up of an wother similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



Cathy Cox Secretary of State