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TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Federated Mills, Inc.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Grant M. Sweet
(Name of Person)
Federated Mills, Inc.
(Firm/Company)
350 Country Club Drive
(Address)
Naples, FL 34110
(City/State and Zip code)

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For further information concerning this matter, please call:

Douglas Sweet at (518) 734-5400
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**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.*

1. Federated Mills, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. New York

(State or country under the law of which it is incorporated)

3. 13-5061184

(FEI number, if applicable)

4. November 6, 1942

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. _____

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. _____

3620 Tamiami Trail N., Naples, FL 34103

(Principal office address)

P.O. Box 127, Windham, NY 12496

(Current mailing address)

8. _____

Sales Office

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Grant M. Sweet

Office Address: _____

350 Country Club Drive

Naples

(City)

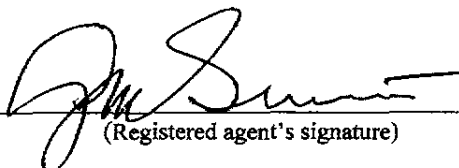
, Florida 34110

(Zip code)

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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. DIRECTORS

Chairman: Grant M. Sweet

Address: 3620 Tamiami Trail N.
Naples, FL 34103

Vice Chairman: Douglas Sweet

Address: 3620 Tamiami Trail N.
Naples, FL 34103

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Grant M. Sweet

Address: 3620 Tamiami Trail N., Naples, FL 34103
Naples, FL 34110

Vice President: _____

Address: _____

Secretary: Douglas Sweet

Address: 3620 Tamiami Trail N., Naples, FL 34103

Treasurer: Douglas Sweet

Address: 3620 Tamiami Trail N., Naples, FL 34103

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NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____

(Signature of Director or Officer listed in number 12 of the application)

14. _____

Douglas Sweet - Secretary

(Typed or printed name and capacity of person signing application)

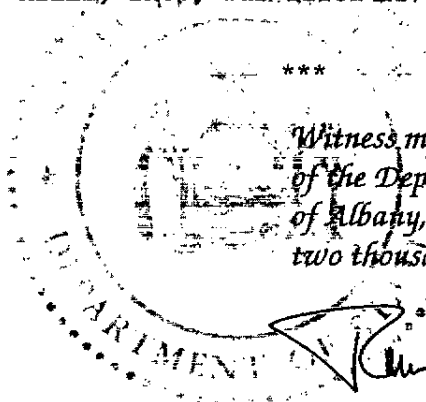
State of New York } ss:
Department of State

I hereby certify, that the Certificate of Incorporation of FEDERATED MILLS, INC. was filed on 11/06/1942, under the name of EXTRIN FOODS, INC., fixing the duration as perpetual, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

A Certificate of Amendment EXTRIN FOODS, INC., changing its name to EXTRIN FLAVORS, INC., was filed 05/31/1968.

A Certificate of Amendment EXTRIN FLAVORS, INC., changing its name to AMERICAN FLAVOR & FRAGRANCE CORP., was filed 06/29/1971.

A Certificate of Amendment AMERICAN FLAVOR & FRAGRANCE CORP., changing its name to FEDERATED MILLS, INC., was filed 12/17/1986.



Witness my hand and the official seal
of the Department of State at the City
of Albany, this 17th day of June
two thousand and five.

Secretary of State