

F0600000839

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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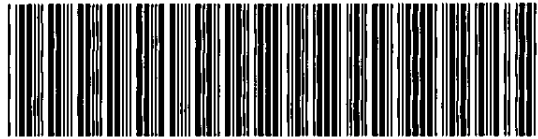
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED

06 FEB -9 PM 2:01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED

06 FEB -9 PM 12:50

DIVISION OF CORPORATION



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 853323 4801098

AUTHORIZATION

COST LIMIT

*[Signature]*  
\$ 70.00

ORDER DATE : February 6, 2006

ORDER TIME : 10:05 AM

ORDER NO. : 853323-005

CUSTOMER NO: 4801098

FOREIGN FILINGS

NAME: SYMRISE INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Doreen Wallace -- EXT# 2928

EXAMINER: \_\_\_\_\_

**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*

FILED  
06 FEB -9 PM 2:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. Symrise 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 Jersey

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

3. 22-1682840

(FEI number, if applicable)

4. July 29, 1994

(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. 300 North Street, Teterboro, New Jersey 07608

(Principal office address)

300 North Street, Teterboro, New Jersey 07608

(Current mailing address)

8. Sale and distribution of flavors, fragrances, cosmetic ingredients, aroma ingredients and related products.

(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: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee

(City)

. Florida 32301

(Zip code)

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.*

Corporation Service Company

By: Tatiana Miller, Asst XO

(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: Sean McManus

Address: 300 North Street, Teterboro, New Jersey 07608

Vice Chairman: Ranier Grimm

Address: Muehlenfeldstrasse 1, 37603 Holzminden, Germany

Director: Markus Sattler

Address: Muehlenfeldstrasse 1, 37603 Holzminden, Germany

Director: \_\_\_\_\_

Address: \_\_\_\_\_

## B. OFFICERS

President: Sean McManus

Address: 300 North Street, Teterboro, New Jersey 07608

Vice President: None

Address: \_\_\_\_\_

Secretary: Jens Obermueller

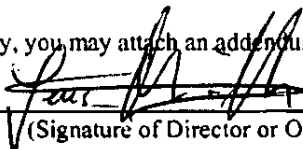
Address: 300 North Street, Teterboro, New Jersey 07608

Treasurer: Peter Steinhoff

Address: 300 North Street, Teterboro, New Jersey 07608

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. Jens Obermueller, Secretary

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

STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
SHORT FORM STANDING

SYMRISE INC.

0100595956

*With the Previous or Alternate Name*

**OCOGARD, INC. (Previous Name)**

**DRAGOCO, INC. (Previous Name)**

*I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on July 29, 1994.*

*As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.*

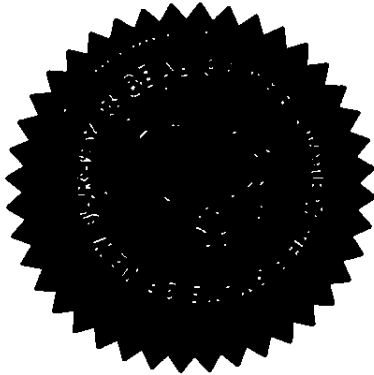
*I further certify that the registered agent and registered office are:*

Waldron Kraemer  
675 Morris Ave  
Springfield, NJ 07081 0000

*Continued on next page . . .*

STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
SHORT FORM STANDING

SYMRISE INC.



IN TESTIMONY WHEREOF, I have  
hereunto set my hand and  
affixed my Official Seal  
at Trenton, this  
7th day of February, 2006

*Bradley Abelow*

Bradley I. Abelow  
Acting State Treasurer