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## **COVER LETTER**

TO: New Filing Sect Division of Corp			
SUBJECT: Reck	kitt Benckiser (U	SA) Inc	
	Name of corpor	ration - must include suffix	
Dear Sir or Madam:			
"Certificate of Existence		n for Authorization to Transact Standing" and check are subm usiness in Florida.	
Please return all correspondent	ondence concerning this m	natter to the following:	
Linda Towers			
	Nam	ne of Person	
Reckitt Benckis	er LLC		
	Firm	/Company	
399 Interpace F	<sup>o</sup> arkway	,	
		Address	•
Parsippany, NJ (	)7054		
	City/St	ate and Zip code	
linda.towers@rb.c	om		
	E-mail address: (to be u	ised for future annual report no	tification)
For further information of	concerning this matter, ple	ase call:	
Linda Towers	at (_97	3 , 404-2585	
Name of Person		rea Code & Daytime Telephor	ne Number
New Filing Sect Division of Corp Clifton Building 2661 Executive Tallahassee, FL	oorations Center Circle 32301	MAILING AD New Filing Sect Division of Cor P.O. Box 6327 Tallahassee, FL	tion porations
Enclosed is a check for the	ne 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**

		REIGN CORPORATION TO TRANSACT				12	
1.	Reckitt Benck	iser (USA) Inc			≥器	A	
		orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	<del>)</del> ,	' "COMPANY," "CORPORATION," .	ARY OF STA	17	FILED
	(If name unavaila	ible in Florida, enter alternate corporate nam	e a	adopted for the purpose of transacting bu	siness in F	logia)	-
2.	Delaware	3	i.	98-0470858	•		
~.	(State or country t	ander the law of which it is incorporated)	•	(FEI number, if applicab	ole)		-
4.	09/14/2005	5	, }_	perpetual			
	(Date	of incorporation)		(Duration: Year corp. will cease to exist	st or "perpe	etual")	•
6.	11/01/2011						
				Florida, if prior to registration) 02, F.S., to determine penalty liability)			•
7:	399 Interpa	ce Parkway, Parsippany, NJ	0	7054			
		(Principal office ad	dr	ess)			•
	399 Interpa	ice Parkway, Parsippany, N	٧	J 07054			
		(Current mailing ad	ldr	ess)			•
8.	holding cor	npany					
	(Purpose(s)	of corporation authorized in home state or o	coı	untry to be carried out in state of Florida	)		
9.	Name and street	address of Florida registered agent: (P.	0	. Box <u>NOT</u> acceptable)			
	Name:	Corporation Service Compa	ın	<u>y</u>			
Oi	ffice Address:	1201 Hays Street		<del></del>			
		Tallahassee		, Florida 32301			
		(City)		(Zip code)			
10	Registered age	ant's accentance					

#### 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: SEE ATTACHED Address: \_\_\_\_\_ Vice Chairman: Address: \_\_ Address: \_\_\_\_ B. OFFICERS President: Address: Vice President: Address: Secretary: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

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

14. Charlotte Simonelli, VP

#### RB (USA) INC OFFICERS AND DIRECTORS

98-0470858

#### DIRECTORS

Rob de Groot 399 Interpace Parkway
Parsippany, NJ 07054

Charlotte Simonelli 399 Interpace Parkway

Parsippany, NJ 07054

Markus Hartmann 399 Interpace Parkway

Parsippany, NJ 07054

#### OFFICERS

Rob de Groot President 399 Interpace Parkway
Parsippany, NJ 07054

Charlotte Simonelli Vice President, Treasurer 399 Interpace Parkway Parsippany, NJ 07054

Markus Hartmann Vice President, Secretary 399 Interpace Parkway

Parsippany, NJ 07054

IZ JAN 17 PH 2: SECRETARY OF STA ALLAHASSEE, FLOR

## Delaware

PAGE 1

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "RECKITT BENCKISER (USA) INC." IS

DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS

IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS

THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRD DAY OF

DECEMber, A.D. 2011.

12 JAN 17 PH 2: 23
SECRETARY OF STATE
ALL AHASSEE FEI COLOR

4029889 8300

111225276

AUTHENTICATION: 9197977

DATE: 12-03-11

You may verify this certificate online at corp.delaware.gov/authver.shtml