### Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : FLORIDA FILING & SEARCH SERVICES

Account Number : I2000000189 Phone : (850)216-0457

: (850)216-0460 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:				
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### FOREIGN PROFIT/NONPROFIT CORPORATION **Algonquin Products Company**

Certificate of Status	0			
Certified Copy	0			
Page Count	04			
Estimated Charge	\$70.00			

Electronic Filing Menu

Corporate Filing Menu

Help

#### **COVER LETTER**

TO: New Filing Section Division of Corporations		
SUBJECT: Algonquin Prod	ducts Company	
Name of corporation - mu		<b></b>
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for Auth "Certificate of Existence," or "Certificate of Good Standing above referenced foreign corporation to transact business in	and check are submitted to register the	,
Please return all correspondence concerning this matter to the	e following:	Ì
James Piva		
Name of Person		
Algonquin Pri	oduct Company	_
155) 5 1 W() 1 0	ulc commons Lane	- <b></b>
Marietta, GA	30067	
City/State and Zi		—
jim.piv. algong	ruin ny lucts, com	
E-mail address: (to be used for fu	ture annual report notification)	<del></del>
For further information concerning this matter, please call:		
Jim Piv~ at (774_)	378-9425 & Daytime Telephone Number	記ると
Name of Person Area Code	& Daytime Telephone Number	
		. <sup>1</sup> 3 ₹
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	OF STATE

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

under the law of which it is incorporated.

# 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.		Algonquin Prodi	lucts Company	
	(Enter name of a	corporation; must include "INCORPORATED, Corp." "Inc." "Co." or "Corp.")	," "COMPANY," "CORPORATION,"	
	(If name unavail	able in Florida, coter alternate corporate name	adopted for the purpose of transacting business in Florida)	
2		Georgia 3	030577218	
-	(State or country	under the law of which it is incorporated)	030577218 (FEI number, if applicable)	
4.		01/02/2006	Perpetual	
	(Datt	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	
5.			·	
		(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	n Florida, if prior to registration) 502, F.S., to determine penelty liability)	
			+ Dak Commons Lanc, Marielta, GA 3	יאחנון.
7.		(Principal office addr		OV 0
		•	•	
		SAML (Current mailing addr	ress)	4
8.		distributor of cleminal of composition authorized in home state or con	V broynes	† <u>†</u>
	(Purpose(s	) of corporation authorized in home state or co	odntry to be carried out in state of Florida)	正作
9.	Name and stree	t address of Florida registered agent; (P.O	D. Box <u>NOT</u> acceptable)	
	Name:	National Corporate Research, Ltd.,	Inc.	
				1
Ot	fice Address:	155 Office Plaza Drive		
		Tallahassee	, Florida <u>32301</u> (Zip code)	
		(City)	(Zip code)	
10.	. Registered og	ent's acceptance:	•	
			ce of process for the above stated corporation at the place	
aes fui	ngnaiea in inis Hier avice to co	appucation, 1 nereby accept the appointm outly with the provisions of all statutes re	tent as registered agent and agree to act in this capacity. Clative to the proper and complete performance of my dia	ies.
an	d I um familiar	with and accept the obligations of my pos	sition as registered agent.	  '
	t.	) (1)		
	-	Karley A. Ba	Kethy A. Butler, Asst. Sec.	
	<del></del>	(Registered agent's signature)		
11.	Attached is a c	ertificate of existence duly authenticated, r	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

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Control No. 0600092

# STATE OF GEORGIA

## Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Drive
Atlanta, Georgia 30334-1530

WETARY OF STATE AHASSEE, FLORIDA

## CERTIFICATE OF

### **EXISTENCE**

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

### ALGONOUIN PRODUCTS COMPANY

#### **Domestic Profit Corporation**

was formed or was authorized to transact business on 01/03/2006 in Georgia. 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 above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other 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.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 25th day of January, 2012

B:Ph

Brian P. Kemp Secretary of State

Carification Number: 7964333-1 Reference: Verify this certificate online at http://ccap.sos.state.ga.us/corp/soskb/verify.asp