

FI 2000002385

**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 : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

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

Email Address: _____

**FOREIGN PROFIT/NONPROFIT CORPORATION
SHS Horticultural Services, Inc.**

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help **7/2012**

FILED
 12 JUN -6 PM 4:05
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

RECEIVED
 12 JUN -6 AM 8:18
 DEPARTMENT OF REVENUE

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: SHS Horticultural Services, 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," or "Certificate of Good Standing" 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:

CHRIS LENTZ
Name of Person
SYNGENTA CORPORATION
Firm/Company
3411 SILVERSIDE RD - SHIPLEY BLDG, STE 100
Address
WILMINGTON, DE 19810
City/State and Zip code
chris.lentz@syngenta.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

____ at (____)
Name of Person Area Code & Daytime Telephone Number

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

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. SHS Horticultural Services, 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. Delaware

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

3. 45-5230078

(FEI number, if applicable)

4. 05/08/2012

(Date of incorporation)

5. Perpetual

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

6. Upon Qualification

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

7. 4343 Commerce Ct., Suite 500, Lisle, IL 60532

(Principal office address)

same

(Current mailing address)

8. Distributor of Flowers, Seeds and Cuttings.

(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: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

Florida 33324

(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.

C T Corporation System

By: Kelly Halford

(Registered agent's signature)

Kelly Halford
Assistant Secretary

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 *SEE ATTACHMENT*

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS *SEE ATTACHMENT*

President: Keith Cable

Address: 4343 Commerce Ct., Suite 500

Lisle, IL 60532

Vice President: _____

Address: _____

Secretary: Cheryl Quain

Address: 3411 Silverside Rd., Ste 100, Shipley Bldg, Wilmington, DE 19810

Treasurer: Jose Olguin

Address: 4343 Commerce Ct., Suite 500, Lisle, IL 60532

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

13. *Cheryl Quain*

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.

14. Cheryl Quain, Secretary

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

FILED
12 JUN -8 PM 4:05
SECRETARY OF STATE
TALLAHASSEE, FL 32301

**Attachment to Florida
Officers & Directors**

1	Full Name:	Thomas Neylon
	Officer/Director:	Officer
	Officer's Title:	Assistant Treasurer
	Director's Title:	
	Business Address:	3411 Silverside Rd., Ste 100, Shipley Bldg.
	City:	Wilmington
	State:	DE
	ZIP Code:	19810
2	Full Name:	Tim Kroenke
	Officer/Director:	Director
	Officer's Title:	
	Director's Title:	Director
	Business Address:	410 Swing Road
	City:	Greensboro
	State:	NC
	ZIP Code:	27409

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TALLAHASSEE, FLORIDA

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SHS HORTICULTURAL SERVICES, 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 TWENTY-FOURTH DAY OF MAY, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

FILED
12 JUN -6 PM 4:05
SECRETARY OF STATE
TALLAHASSEE, FL 32399

5146661 8300

120628573

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



Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 9596171

DATE: 05-24-12