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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

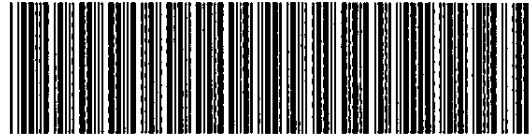
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SECRETARY OF STATE
TALLAHASSEE, FL 32399

1 Burch FEB 14 2013

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Cooperative Regions of Organic Producer Pools

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:

Scott Bruegmann

Name of Person

Cooperative Regions of Organic Producer Pools

Firm/Company

One Organic Way

Address

La Farge, WI 54639

City/State and Zip code

scott.bruegmann@organicvalley.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Scott Bruegmann

Name of Person

at (608)

625-7505

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
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Cooperative Regions of Organic Producer Pools, 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. Wisconsin

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

3. 39-1605145

(FEI number, if applicable)

4. March 10, 1988

(Date of incorporation)

5. Perpetual

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

6. February 15, 2013

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

7. One Organic Way, La Farge, WI 54639

(Principal office address)

One Organic Way, La Farge, WI 54639

(Current mailing address)

8. To purchase and sell organic 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: NRAI Services, Inc.

Office Address: 515 East Park Avenue

Tallahassee

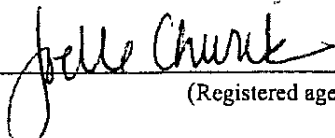
(City)

, 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.



(Registered agent's signature)

Jelle Churik, Asst. 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

Chairman: See Attached Sheet

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: See Attached Sheet

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. _____

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. Micheal Bedessem CFO

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

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SECRETARY OF STATE
TALLAHASSEE, FL 32301

Board of Directors 2012

Chief Executive Officer
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
Chief Financial Officer

George Siemon

One Organic Way
La Farge, WI 54639
Work 608-625-2602
Fax 608-625-3020

Treasurer

Mark Kruse (Marcia) (2012-2015)

2601 La Fayette Ridge Rd
Lansing, IA 52151
Home 563-586-2433
Cell 563-419-2637
mekruse@acegroup.cc

Michael Bedessem

One Organic Way
La Farge, WI 54639
Work 608-625-2602
Fax 608-625-3020

Secretary

Dan Pearson (Terri) (2012-2015)

524 Cty MM
River Falls, WI 54022
Home 715-425-9488
Cell 715-222-8988
Fax 715-426-6294 (call to get OK)
dipearson@baldwin-telecom.net

Chief Operating Officer

Louise Hemstead

One Organic Way
La Farge, WI 54639
Work 608-625-2602
Fax 608-625-3020

Director

Wayne Peters (Irene) (2010-2013)

S598 Schlicht Road
Chaseburg, WI 54621
Home 608-452-3066
Farm 608-483-2421
Fax 608-783-2815
peters@nmvt.net

BOD Advisor

David Lathrop

P.O. Box 143
4353 Jordan Drive
McFarland, WI 53558
Cell 608-695-9200
Fax 608-835-3450
dlathrop@aol.com

Director

Travis Forgues (Amy) (2011-2014)

251 Alburg Spring Road
Alburg, VT 05440
Home 802-796-4492
Cell 802-752-9541 or 802-370-6315
Fax 802-796-4496
travis.forgues@organicvalley.coop

BOD Advisor

Jerome McGeorge

E13050 E. Kettle Rd
La Farge, WI 54639
Home 608-625-2651

President

Arnie Trussoni (Tama) (2012-2015) Director

E1404 Mundsock Road
Genoa, WI 54632
Home 608-689-2192
Corky@nmvt.net

Steve Pierson (Susan) (2011-2014)

22431 River Road NE
St. Paul, OR 97137
Home 503-633-4455
Cell 503-750-2229
stevepierson@stpaultel.com

Vice President

Pam Riesgraf (Jeff) (2010-2013)

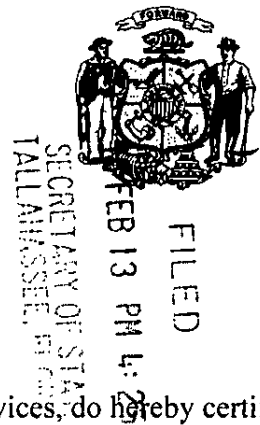
2065 5th Ave
Edgar, WI 54426
Cell 612-670-9417
pamriesgraf@aol.com

DOM
185

United States of America

State of Wisconsin

DEPARTMENT OF FINANCIAL INSTITUTIONS



To All to Whom These Presents Shall Come, Greeting:

I, PAUL M. HOLZEM, Administrator, Division of Corporate and Consumer Services, do hereby certify that

COOPERATIVE REGIONS OF ORGANIC PRODUCER POOLS

is a domestic cooperative organized under the laws of this state and that its date of incorporation is March 10, 1988, and that thereafter a certificate of such filing and grant of corporate powers and privileges was duly issued to said organization as provided by law.

I further certify that it appears from the records of this department that said organization continued and now is a body corporate, duly and legally incorporated, organized and existing by and under the laws of this state, and is in good standing.



IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed the official seal
of the Department on January 14, 2013.

Paul M. Holzem

PAUL M. HOLZEM, Administrator
Division of Corporate and Consumer Services
Department of Financial Institutions

BY: *Paul M. Holzem*