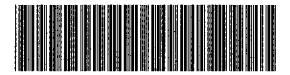
# F13000002390

(Requestors	s Name)
(Address)	
(Address)	
(City/State/Z	ip/Phone #)
PICK-UP V	VAIT MAIL
(Business E	ntity Name)
(Document	Number)
Certified Copies Ce	ertificates of Status
	p.
Special Instructions to Filing Of	ricer:





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06/03/13--01027--002 \*\*1100.00

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pustry

T. Burch JUN 4 2013

#### **COVER LETTER**

TO: New Filing Section Division of Corporations			
SUBJECT: Actega WIT, Inc	<u>:</u>		
<u> </u>		- must include suffix	7-7-
Dear Sir or Madam:			
The enclosed "Application by Foreign Co "Certificate of Existence," or "Certificate above referenced foreign corporation to tr	of Good Star	nding" and check are sub	
Please return all correspondence concerni	ng this matter	r to the following:	
Sarah Neill			
	Name of	Person	
Actega WIT, Inc.			
	Firm/Com	pany	
125 Technology Drive			
Lincolnton, NC 28092	Addre	ess	
	City/State a	nd Zip code	
sarah.neill@altana.com			
E-mail address	to be used t	for future annual report n	notification)
For further information concerning this m	atter, please o	call:	
Kendal Bradley	704	735-8282	
Name of Person		Code & Daytime Telepho	one Number
STREET/COURIER ADDRESS New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		MAILING AI New Filing Se Division of Co P.O. Box 6327 Tallahassee, F	ction orporations
■ \$70.00 Filing Fee □ \$78.75 Filing Certificate o	g Fee &	\$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy



May 16, 2013

SARAH NEILL 125 TECHNOLOGY DRIVE LINCOLNTON, NC 28092

SUBJECT: ACTEGA WIT, INC. Ref. Number: W13000028876

We have received your document for ACTEGA WIT, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$1,100.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tim Burch Regulatory Specialist II

Letter Number: 713A00012365

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

Actega W	/IT, Inc.				<u> </u>
(Enter name of co	orporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.")	D,'	' "COMPANY," "CORPORATION,"		3 FH 4: 2
(If name unavaila	ble in Florida, enter alternate corporate nar	ne :	adopted for the purpose of transacting busin	ness in Flo	orida)
Delaware		2	270168047		
	under the law of which it is incorporated)	٥.	(FEI number, if applicable)	)	
04/08/20	09	5	Perpetual		
	of incorporation)	٥.	(Duration: Year corp. will cease to exist of	or "perpe	tual")
10/02/20	09				
125 Techr	nology Drive; Lincolnton,  (Principal office a nology Drive; Lincolnton, Note that the color of water-based distribution	ddi VC iddi	ress) C 28092 ress)		
	) of corporation authorized in home state or				
. Name and stree	et address of Florida registered agent: (	P.C	O. Box NOT acceptable)		
Name:	Michael McKinney				
office Address:	120 Hibiscus Woods C	T	<u>9A</u>		
	Deltona		, Florida 32725		

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: Dr. Roland Peter Address: \_Abelstrasse 43 46483 Wesel, Germany Vice Chairman: Address: \_\_ Director: Michael McKinney Address: 125 Technology Drive Lincolnton, NC 28092 Director: **B. OFFICERS** President: Heinz Ulrich Stolte Address: 1922 Spruce Street Philadelphia, PA 19103 Vice President: Chris Gawert Address: 125 Technology Drive Lincolnton, NC 28092 Secretary: Rudolph Houck Address: 3 Park Avenue 16th Floor; New York City, NY 10016 Treasurer: 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.

14. Michael McKinney, CFO

## Delaware

PAGE 1

### The First State

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

DELAWARE, DO HEREBY CERTIFY "ACTEGA WIT, 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 MAY, A.D.

2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ACTEGA WIT, INC." WAS INCORPORATED ON THE EIGHTH DAY OF APRIL, A.D. 2009.

13 JUN = 3 PM 4: 26

4674548 8300

130522500

AUTHENTS CATION: 0405093

DATE: 05-03-13

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