

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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		RELOAD button on yo		from this	
p	age. Doing so will g	generate another cover	sheet.	TAX 25	
To:				77. 52	
	Division of Co. Fax Number	•		25 ASSE	
From:	Account Name	: C T CORPORATION	OVEMEM	me a	
		: FCA000000023 : (850)205-8842	9191FM		-
	Fax Number	: (850)878~5368		3.5	

\*\*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 DURACELL DISTRIBUTING, INC.

Certificate of Status	0
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Help

### COVER LETTER .

•	
TO: Registration Section	
Division of Corporations	·
SUBJECT: Duracell Distributing, Inc.	
Name of corporation	- must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for "Certificate of Existence," or "Certificate of Good Stan above referenced foreign corporation to transact busine	ding" and check are submitted to register the
Please return all correspondence concerning this matter	to the following:
Name of	Person
Firm/Com	pany
	•
Addre	288
•	,
City/State a	nd Zip code
JOHNSON,SR.5@PG,COM	•
E-mail address: (to be used f	or future annual report notification)
	.11.
For further information concerning this matter, please c	au;
at (	)
Name of Person Area Code	e Daytime Telephone Number
•	
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, FL 32314
Tallahassee, FL 32301	·
Enclosed is a check for the following amount:	•
S70.00 Filing Fee S78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Ser.50 Filing Fee, Certified Copy 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.	· ·							
	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")							
	(If name unavail	able in Florida, enter alternate corporate na	me adopted for the purpose of transac	cting business in Florida)				
2.	Delaware		3. 47-2867579					
		y under the law of which it is incorporated)		applicable)				
4.	12/05/2014	•	5. Perpetual					
	<del></del>	of incorporation)	(Date of duration, if oth	ner than perpetual)				
6.	Upon Qualificat	tion						
۷.		(Date first transacted busines	ss in Plorida, if prior to registration) 7.1502, F.S., to determine penalty lia	bility)				
7.	One Procter & G	amble Plaza, Cincinnati, OH 45202						
Ī		(Pris	ncipal office address)					
	P.O. Box 599, Ci	ncinnati, OH 45201						
		(Current ma	ailing address, if different)	For Man				
8.	Name and street	et address of Florida registered agent: (	P.O. Box NOT acceptable)	February No.				
	Name:	C T Corporation System	,					
Οŧ	fice Address:	1200 South Pine Island Road	<del></del>					
		Plantation	, Florida 33324					
		(City)	(Zip code)	File 6				
He de fui	iving been nam signated in this other agree to c	ent's acceptance: sed as registered agent and to accept se application, I hereby accept the appoil omply with the provisions of all statute familiar with and accept the obligation  C T Corporation System	intment as registered agent and a es relative to the proper and com is of my position as registered ag	igree to act in this capacity. I plete performance of my ent.				
		\U	Kristin	Bolden Secretary				
	_	By: (Register	ed agent's signature)					
		(11DB13101	an water a divinish at					

10. 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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: SEE ATTACHMENT Address: \_\_\_\_ Vice Chairman: Address: \_\_\_ Director: \_\_ Address: .... Director: Address: **B. OFFICERS** President: SEE ATTACHMENT Address: \_\_\_ Vice President: Address: \_\_ Secretary: \_\_ Address: \_\_ Treasurer:

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 11 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.

13. HATSUKI MIYATA, Vice President

11/25/2015 10:08:25 AM From: To: 8506176383( 5/6 )

## **Duracell Distributing, Inc.**

Jason P. Muncy	Director	One Procter & Gamble Plaza, Cincinnati, OH 45202
Susan S. Whaley	Director	One Procter & Gamble Plaza, Cincinnati, OH 45202
Laura Becker	President	One Procter & Gamble Plaza, Cincinnati, OH 45202
Andrew Gibbs	Treasurer	One Procter & Gamble Plaza, Cincinnati, OH 45202
Jason Muncy	Secretary	One Procter & Gamble Plaza, Cincinnati, OH 45202
Pam Bloodgood	Vice President and Assistant Secretary	One Procter & Gamble Plaza, Cincinnati, OH 45202
Hatsuki Miyata	Vice President and Assistant Secretary	One Procter & Gamble Plaza, Cincinnati, OH 45202
Matt Loftus	Vice President and Assistant Secretary	One Procter & Gamble Plaza, Cincinnati, OH 45202

20 NOV 25 AM 8: 15

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# Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "DURACELL DISTRIBUTING, 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 NOVEMBER, A.D.

2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

Authentication: 10485705

Date: 11-24-15

5652543 8300 SR# 20151063146