F/6000003/10

(Re	questor's Name)			
(Ad	dress)			
(Address)				
(Cit	ty/State/Zip/Phone #	<u></u>		
(Cil	tyrotate/zip/t none #	,		
PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Name)			
(Do	ocument Number)			
Certified Copies	_ Certificates of	Status		
Special Instructions to Filing Officer:				
1				

Office Use Only



000287780740

07/12/16--01030--005 **78.75

MIL 12 AMII: 16

K. SALY EXAMINER JUL 13 -

COVER LETTER

TO:	Registration S	Section			7/11/16
	Division of C	Division of Corporations			
SUB	JECT: RO	OYAL CANIN U.	S.A., INC.		
		Nan	ne of corporation - m	ust include suffix	
Dear	Sir or Madam:				
"Cert	ificate of Exister	nce," or "Certific		g" and check are sub	ct Business in Florida," emitted to register the
Please	e return all corre	spondence conce	rning this matter to t	he following:	
K	athleen J. 1	Dow, Paralega	al.		
			Name of Pers	on	
P	olsinelli P	С			
			Firm/Company	4	
1	.00 S. Fourt	h Street, Su	ite 1000		
			Address		
S	St. Louis, M	0 63102			
		· ···· · · · · · · · · · · · · · · · ·	City/State and Z	ip code	
kd	low@polsinel	li.com	•	•	_
	.c.pololiol	E-mail addr	ess: (to be used for fi	uture annual report i	notification)
For fu	urther informatio	on concerning this	ess: (to be used for for seasons matter, please call:		7. Dous
Kat	thleen J. Do	W	_ at (<u>314</u>)_	55246842	
	Name of Pers	son	Area Code	Daytime Telep	hone Number
	Registration S Division of C Clifton Buildi	orporations ing we Center Circle	ESS:	MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7
Enclo	sed is a check fo	or the following a	mount:		
□ \$7	0.00 Filing Fee	S78.75 Fill Certificat		8.75 Filing Fee & rtified 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. Royal Canin U.S.A., 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) (FEI number, if applicable) (State or country under the law of which it is incorporated (Date of duration, if other than perpetual) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 500 Fountain Lakes Blvd., Suite 100, St. Charles, MO 63301 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) NRAI Services, Inc. Name: 1200 South Pine Island Road Office Address: Plantation Florida (City) 9. 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.

Michael Mono(Registered agent's signature)

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:	FILE
A. DIRECTORS	FILED 2016 JUL 12 AM II: 16
Director: Chairman: Andrew Scipio del Campo	2016 JUL 12 AM.
Address: 6885 Elm Street, McLean, VA 22101	TALLAHASSEE, FLORIE
Director: VKrXhwmmx Loic Moutault	
Address: 6885 Elm Street	
McLean, VA 22101	
Keith Levy Director:	
500 Fountain Lakes Blvd. Address:	
St. Charles, MO 63301	
Khaled M. Rabbani Director:	
500 Fountain Lakes Blvd.	
Address: St. Charles, MO 63301	
B. OFFICERS Keith Levy President:	
500 Fountain Lakes Blvd., Suite 100 Address:	
St. Charles, MO 63301	
Vice President:	
Address:	
Secretary:	
Address: 100 S. Fourth Street, Suite 1000, St. Louis, MO 63102	
Reuben Gamoran Treasurer:	
6885 Elm Street, McLean, VA 22101 Address:	
	1
NOTE: If necessary, you may attach an addendum to the application listing additional list	7/11/16
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 a third degree felony as provided for in s.817.155, F.S.	
Jeffrey E. Fine, Secretary 13.	
(Typed or printed name and capacity of person signing applic	cation)

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "ROYAL CANIN U.S.A., 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 ELEVENTH DAY OF JULY, A.D. 2016.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ROYAL CANIN U.S.A., INC." WAS INCORPORATED ON THE SEVENTH DAY OF AUGUST, A.D. 2003.

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

2016 JUL 12 AM II: 16
SLORE WASSEE, FLORIDA

Authentication: 202634437

Date: 07-11-16