

4/10/2018

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

****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

Corteve, Inc.

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

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

J. LEGGETT
APR 11 2018

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Corporate Filing Menu

Help

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. Corteva, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 82-4979096
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 03/16/2018 5. Perpetual
(Date of incorporation) (Date of duration, if other than 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. 974 Centre Road, Wilmington, DE 19805
(Principal office address)

same
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NCT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(City) (Zip code)

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.

C T Corporation System
By: James M. Halpin
James M. Halpin
Assistant Secretary
(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:

A. DIRECTORS SEE ATTACHMENT

Chairman: _____

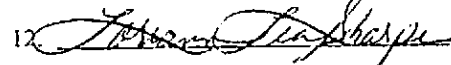
Address: _____

Vice Chairman: _____

Address: _____

Director: Michael P. HeffernanAddress: 974 Centre RoadWilmington, DE 19805Director: Andrew R. GirardiAddress: 974 Centre RoadWilmington, DE 19805**B. OFFICERS SEE ATTACHMENT**President: Michael P. HeffernanAddress: 974 Centre RoadWilmington, DE 19805Vice President: Andrew R. GirardiAddress: 974 Centre RoadWilmington, DE 19805Secretary: Loriann Lea SharpeAddress: 974 Centre Road, Wilmington, DE 19805Treasurer: Andrew R. GirardiAddress: 974 Centre Road, Wilmington, DE 19805

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

12. 

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. Loriann Lea Sharpe, Secretary

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

**Attachment to Florida
Officers & Directors**

- | | | |
|---|-------------------|---------------------|
| 1 | Full Name: | James P. Donaghey |
| | Officer/Director: | Officer, Director |
| | Officer's Title: | Vice President |
| | Director's Title: | Other Director |
| | Business Address: | 974 Centre Road |
| | City: | Wilmington |
| | State: | DE |
| | ZIP Code: | 19805 |
| 2 | Full Name: | James P. Donaghey |
| | Officer/Director: | Officer |
| | Officer's Title: | Assistant Treasurer |
| | Director's Title: | |
| | Business Address: | 974 Centre Road |
| | City: | Wilmington |
| | State: | DE |
| | ZIP Code: | 19805 |
| 3 | Full Name: | Calissa W. Brown |
| | Officer/Director: | Officer |
| | Officer's Title: | Vice President |
| | Director's Title: | |
| | Business Address: | 974 Centre Road |
| | City: | Wilmington |
| | State: | DE |
| | ZIP Code: | 19805 |
| 4 | Full Name: | Calissa W. Brown |
| | Officer/Director: | Officer |
| | Officer's Title: | Assistant Secretary |
| | Director's Title: | |
| | Business Address: | 974 Centre Road |
| | City: | Wilmington |
| | State: | DE |
| | ZIP Code: | 19805 |
| 5 | Full Name: | Sharon E. Smith |
| | Officer/Director: | Officer |
| | Officer's Title: | Vice President |
| | Director's Title: | |
| | Business Address: | 974 Centre Road |
| | City: | Wilmington |
| | State: | DE |
| | ZIP Code: | 19805 |
| 6 | Full Name: | Sharon E. Smith |
| | Officer/Director: | Officer |
| | Officer's Title: | Assistant Treasurer |
| | Director's Title: | |
| | Business Address: | 974 Centre Road |
| | City: | Wilmington |

State:	DE
ZIP Code:	19805
7 Full Name:	Robert J. Tuinstra Jr.
Officer/Director:	Officer
Officer's Title:	Assistant Treasurer
Director's Title:	
Business Address:	974 Centre Road
City:	Wilmington
State:	DE
ZIP Code:	19805

FOUO

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "CORTEVA, 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 TENTH DAY OF APRIL, A.D. 2018.

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



6801238 8300

SR# 20182569999

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

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line.

Jeffrey W. Bullock, Secretary of State

Authentication: 202484742

Date: 04-10-18