F18000003464

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 866.625.0838 COGENCYGLOBAL.COM

Account#: I20000000088 7/27/18 Date:___ **KEN HOWELL** Name:__ D320717 Reference #:____ Entity Name: EUROFINS FOOD CHEMISTRY TESTING US, INC. ✓ Articles of Incorporation/Authorization to Transact Business Amendment Change of Agent Reinstatement ISSUES - CALL KEN @ Conversion 518-213-0738 Merger Dissolution/Withdrawal ☐ Fictitous Name Other _____

Authorized Amount:

Signature:_



July 26, 2018

COGENCYGLOBAL

SUBJECT: EUROFINS FOOD CHEMISTRY TESTING US, INC.

Ref. Number: W18000068106

We have received your document for EUROFINS FOOD CHEMISTRY TESTING US, INC. and the authorization to debit your account in the amount of \$. However, the document has not been filed and is being returned for the following:

Page 2 is missing for officers and directors.,

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 218A00015390

Brittany M Figueroa Regulatory Specialist II

www.sunbiz.org

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.	Eurofins Food Chemistry Testing US, Inc.				
	(Enter name of con "Inc.," "Co.," "Con	rporation; must include "INCORPORATED," "(rp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATION,"		
	(If name unavailab	ole in Florida, enter alternate corporate name ado	pted for the purpose of transacting business in Florida)		
2.		Delaware 3			
	(State or country	under the law of which it is incorporated)	(FEI number, if applicable)		
4.		6/5/2018 _{5.}			
-	(Date o	o/3/2018 55 fincorporation)	(Date of duration, if other than perpetual)	•	
6.		upon filin	9		
		(Date first transacted business in Fi (SEB SECTIONS 607.1501 & 607.1502			
7		3301 Kinsman Blvd., Ma	dison W 53704		
•••		(Principal	office address)	•	
		(Current mailing a	address, if different)	18 J	
8.	Name and street	address of Florida registered agent: (P.O. I	Box NOT acceptable)	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	! :
	Name:	COGENCY GLOBAL INC.			П
Oi	ffice Address:	115 North Calhoun Street, Suite 4	- - こ)
		Tallahassee	, Florida 32301 (Zip code)	30	
		(City)	(Zip code)	Tip —	

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 dades, and I am familiar with and accept the obligations of my position as registered agent.

(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.

FILED

18 JUL 27 AM 4: 30

SECRETARY DE STATE

11. Names and business addresses of officers and/or directors:

A. DIRECTORS	Book Oulotte	ALLAHASSEE, FLOR			
Chairman:					
Address:	3301 Kinsman Blvd., Madison WI 5分つひ-				
Vice Chairman:					
Director:	Sean Murray				
•	0.000 - 0.000 - 4.50				
Address:	Des Moines IA 50321				
Director:					
Address:					
B. OFFICERS					
President:	Ross Gulotta				
Address:					
Vice President:					
Address:					
Secretary:	Dan Dickinson				
Address:		321			
Treasurer:	Ralf Fassbender				
Address:	2425 New Holland Pike Lancaster Pa 17601				
NOTE: If necessary, you m	E: If necessary, you may attach an addendume to the application listing additional officers and/or directors.				
12	Signature of Director or Officer				
The officer or director signir are true and that he or she is a third degree felony as prov	ng this document (and who is listed in number 11 above) affirms the aware that false information submitted in a document to the Depart	at the facts stated herein rument of State constitutes			
13.	Ralf Fassbender Treasurer				
(Ту	ped or printed name and capacity of person signing application)				

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "EUROFINS FOOD CHEMISTRY TESTING US,

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 FIFTH DAY OF JULY,

A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EUROFINS FOOD CHEMISTRY TESTING US, INC." WAS INCORPORATED ON THE FIFTH DAY OF JUNE, A.D. 2018.

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

SECRETARY OF STATE
TAIL ARASSEE FLORID.

Authentication: 203014531

Date: 07-05-18

6917699 8300 SR# 20185524387

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