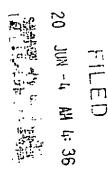
F20000002499

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(D					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
- -					
6/5 UX					





600345606926





CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 310813 5039767

AUTHORIZATION: Signella Bleman

COST LIMIT : C\$=\67.\50_____

ORDER DATE : June 3, 2020

ORDER TIME : 11:21 AM

ORDER NO. : 310813-005

CUSTOMER NO: 5039767

FOREIGN FILINGS

NAME: H B CHEMICAL CORPORATION

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX-- CERTIFIED COPY >
_____ PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT#62980

EXAMINER: ____

COVER LETTER

TO:	Registration Section Division of Corpora						
SUBJi	ECT: HB Chemical	Corporation					
501301		Name of corporat	ion - mus	t include suffix		_	
Dear Si	ir or Madam:						
"Certif	icate of Existence," o	by Foreign Corporation for "Certificate of Good Surporation to transact busing	tanding"	and check are subn	Business in Fl nitted to registe	orida." r the	•
Please	return all correspond	ence concerning this mat	ter to the	following:			
Nicole !	Pavisic						
		Name	of Person	, <u> </u>			
Ravago	Americas LLC						
		Firm/C	ompany				
1900 St	ummit Tower Blvd Suit	e 900					
Orlando	o, FL 32810	Ad	dress			10 Ju	
npavisio	c@ravagoamericas.con	City/State	and Zip	code	7 wh.		
	E	-mail address: (to be use	d for futi	re annual report no	tification)	<u>-</u> -	-
For furt	ther information cond	erning this matter, pleas	e call:			4: 37	
Nicole I	Pavisic	at (78-	1-4289			
	Name of Person	Area Co	ode	Daytime Telepho	one Number	_	
	STREET/COURIE Registration Section Division of Corpora The Centre of Tallal 2415 N. Monroe Str Tallahassee, FL 323	tions nassee eet, Suite 810		MAILING AD Registration Sec Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations		
Please m		ollowing amount: FLORIDA DEPARTME? \$78.75 Fiting Fee & Certificate of Status	□ \$78.7	CATE 15 Filing Fee & fied Copy	\$87.50 Fili Certificate Certified C	of Sta	

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.

`	able in Florida, enter alternate corporate name ad	lopted for the purpose of transacti	ng business in Florida)	
. Ohio 3. 34-1532229				
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)		
October 20, 1986 (Date of incorporation) 5.				
		(Date of duration, if other than perpetual)		
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150	Florida, if prior to registration)	lie	
	wer Blvd Suite 900, Orlando, FL 32810	2, F.S., to determine penanty habi	nty)	
	(Principal office	street address)		
1900 Summit To	wer Blvd Suite 900. Orlando, FL 32810	sareer address)		
	(Current mailing	address, if different)		
			20	
. Name and stree	et address of Florida registered agent: (P.O.	Box NOT acceptable)		
Name:	Corporation Service Company			
	1201 Hays Street		IT.	
ffice Address:	<u> </u>			
	Tallahassee	, Florida	#: u	
	(City)	(Zip code)		

By: Amanda Cobinson
(Registered agent's signature)

Amanda Robinson
Asst. Vice President

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.

Corporation Service Company

A. DIRECTORS	••				
□ Chairman	Name:	□Chairman	Name:	Bittenbinder, CFO and Treas	
□Vice Chairman	Address:	□Vice Chairman	1900 Summit Tower Blyd		
□Director Suite 900, Orlando, FL 32810		□Director		rlando, FL 32810	
■ President		□President			
□Vice President		□Vice President			
☐ Secretary	□Treasurer	□Secretary		■ Treasurer	
□Other	□Other	Other		□Other	
□Chairman □Vice Chairman □Director	Name:	□Chairman □Vice Chairman □Director	Address:		
□President		□President			
□Vice President		□Vice President			
Secretary	□Treasurer	□Secretary		☐ Treasurer	
Other	Other	□Other		Other	
□Chairman	Name:	☐ Chairman	Name:		
□Vice Chairman	Address:	☐Vice Chairman	Address:	110	
□Director		□Director		: 37	
□President		□President			
□Vice President		□Vice President			
☐ Secretary	□Treasurer	□Secretary		□Treasurer	
□Other	□Other	□Other		□Other	
Important Notice: I individuals may be John Provo. 12. Son Provost Gun 1, 202	0 17 26 EDT)	rtment of State Annual Re	port form.	ourposes only. Non-indexed	
	Signature of Direct	tor or Officer			
she is aware that fa s.817.155, F.S.	tor signing this document (and who is listed in nu- lse information submitted in a document to the De	mber 11 above) affirms the partment of State constitu	at the facts state tes a third degre	d herein are true and that he or re felony as provided for in	
John E. Prov	vost, Treasurer				

UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Frank LaRose, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show H B CHEMICAL CORPORATION, an Ohio corporation, Charter No. 688315, having its principal location in Cuyahoga Falls, County of Summit, was incorporated on October 28, 1986 and is currently in GOOD STANDING upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 3rd day of June, A.D. 2020.

L John

Ohio Secretary of State

Validation Number: 202015503044