F22000002641

(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:						

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2022 APR 27 PH 4: 15

RECEIVED

S. FRANKLIN APR 2 8 2907 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 642838 7 7144145

AUTHORIZATION : THE REAL PROPERTY OF THE PROPE

COST LIMIT : \$ 87.50

ORDER DATE: April 27, 2022

ORDER TIME : 1:59 PM

ORDER NO. : 641838-005

CUSTOMER NO: 7144145

FOREIGN FILINGS

NAME: FLORACHEM 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: Alexxis Weiland -- EXT#

EXAMINER:

COVER LETTER

	stration Section ion of Corporations					
SUBJECT:	Florachem Corporation					
	Name	of corporation - n	oust include suffix			
Dear Sir or M	adam:					
"Certificate of	"Application by Foreign C f Existence," or "Certificat ced foreign corporation to	e of Good Standing	g" and check are submi			
Please return	all correspondence concerr	ning this matter to t	the following:			
Jon Leonard						
		Name of Pers	son			
Florachem Cor	rporation					
		Firm/Compan	iy			
2664 Port Indu	strial Drive					
		Address	-			
Jacksonville, F	L 32226			.022		
		City/State and 2	Zip code			
jleonard@flora	achem.com			27		
	E-mail addres	ss: (to be used for f	uture annual report not	ification) -0		
For further inf	formation concerning this t	natter, please call:		2022 IPR 27 PH 4: 15		
David Gallagh	ег	at ()	221-4269	, _ 0,		
Name	e of Person	Area Code	Daytime Telepho	ne Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			Registration Sec Division of Corp P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
	check for the following am leck payable to: FLORIDA D ing Fee	DEPARTMENT OF ng Fee & \$7		■ \$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.

•	oration orporation; must include "INCORPORATED,"	"COMPANY" "CORPORATION		
"Inc.," "Co.," "C	forp." "Inc." "Co." or "Corp.")	COMPANT, CORPORATION	•	
(If name unavail	able in Florida, enter alternate corporate name ac	lopted for the purpose of transacting	business in Florida)	
Delaware	3.			
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)		
April 21, 2022	5.			
(Date	of incorporation)	(Date of duration, if other than perpetual)		
August 16, 1988	В			
	(Date first transacted business in I		-	
366 t Dowt Industry	(SEE SECTIONS 607.1501 & 607.150	2, F.S., to determine penalty liability	у)	
2004 POR Industr	rial Drive, Jacksonville, FL 32226			
	(Principal office	e <u>street</u> address)		
	(Current mailing	address, if different)	_	
	(Current maning	address, if different)		
Name and stree	et address of Florida registered agent: (P.O.	Box NOT acceptable)	25	
	Corporation Service Company	ison in its indicate of the interest of the in)22	
Name:		_	PR	
ffice Address:	1201 Hays Street		2022 LPR 27	
	Tallahassee	51 . , 32301		
	(City)	, Florida (Zip code)	PH 4: 15	
	(= <u>-</u> -, /	(y	<u>'</u>	

allexus Wailand, assistant va president
(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.

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

DocuSign Envalope ID: 913C4CBF-1FA0-4857-B135-6D57F5164C95 A. DIRECTORS

□Chairman	Name:	□Chairman Name: Kevin O'Malley		
□Vice Chairman	Address: 2664 Port Industrial Drive.	□Vice Chairman	Address:	2664 Port Industrial Drive,
■Director	Jacksonville, FL 32226	Director		Jacksonville, FL 32226
■ President		□President		
□Vice President		■ Vice President		
■ Secretary	□Treasurer	☐ Secretary		Treasurer
□Other	Other	□Other		□Other
□ Chairman	Name:	□Chairman		
□ Director	Address.	□ Director	riduress.	-
□President		□President		
		□Vice President		
Secretary	□Treasurer	Secretary		□Treasurer
□Other		□Other		□Other
□ Chairman	Name:	□Chairman	Name:	2022 APR
□Vice Chairman	Address;	□ Vice Chairman	Address:	2
□Director		□Director		- <u></u>
□President		□President		
□Vice President		□Vice President		; u
☐ Secretary	□Treasurer	□Secretary		□Treasurer
□Other	Other	Other		□Other
12. John Lon 12. The officer or direct	Use an attachment to report more than six (6). The attaction of the index when filing your Florida Department Signature of Director or extensioning this document (and who is listed in number lise information submitted in a document to the Department.	of State Annual Re Officer H above) affirms th	at the facts	stated herein are true and that he or
s.817.155, F.S.				, , , , , ,



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

DELAWARE, DO HEREBY CERTIFY "FLORACHEM CORPORATION" 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-SIXTH DAY OF APRIL, A.D.

2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FLORACHEM CORPORATION" WAS INCORPORATED ON THE TWENTY-FIRST DAY OF APRIL,

A.D. 2022.

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

2022 APR 27 PH 4: 15

Authentication: 203271439

Date: 04-26-22