

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

96 NOV 13 PM 2: 06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F94000003049

1. Corporation Name

IRON VENTURE SUBSIDIARY, INC.

Principal Place of Business

THE VIGOR CORPORATION
225 N. MICHIGAN AVE. SUITE 2500
CHICAGO IL 60601

Mailing Address

THE VIGOR CORPORATION
225 N. MICHIGAN AVE. SUITE 2500
CHICAGO IL 60601

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

c/o IMC Global Inc.

Suite, Apt. #, etc.

2100 Sanders Rd.

City & State

Northbrook, IL

Zip
60062-6146

Country

USA

3. New Mailing Office Address, If Applicable

c/o IMC Global Inc.

Suite, Apt. #, etc.

2100 Sanders Rd.

City & State

Northbrook, IL

Zip
60062-6146

Country

USA

REINSTATEMENT

4. Date Incorporated or Qualified
To Do Business in Florida

08/10/1994

5. FEI Number

36-3958240

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PD	POWELL, ROBERT E. JR. VACANT	225 N. MICHIGAN AVE. SUITE 2500	CHICAGO IL 60601
S	WILLIAMS, ROSE MARIE	225 N. MICHIGAN AVE. SUITE 2500 2100 Sanders Rd.	CHICAGO IL 60601 Northbrook, IL 60062-6146
ASD	NYMAN, KAREN E	225 N. MICHIGAN AVE. SUITE 2500 2100 Sanders Rd.	CHICAGO IL 60601 Northbrook, IL 60062-6146
			600002005066--6 -11/14/96--01102--006 ****375.00 ****375.00
			JB11-13-96

8. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS ST.
TALLAHASSEE FL 32301

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

Karen B. Rozar

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Rose Marie Williams
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
ROSE MARIE WILLIAMS

10/22/96 847-205-4866
Date Daytime Phone #