M05000003924

| (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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M. HODGES

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Law Department

Hormel Foods Corporate Services, LLC 1 Hormel Place Austin MN 55912-3680

July 1, 2005

State of Florida Registration Section Division of Corporations PO Box 6327 Tallahassee FL 32314

Re: Hormel Foods Sales, LLC - Registration

Dear Secretary of State:

Enclosed herewith for filing please find the original Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida, the Certificate of Designation of Registered Agent/Registered Office, a Transmittal Letter, our check for the filing fees, and a Certificate of Good Standing issued by the State of Delaware.

If you have any questions, please do not hesitate to contact me.

Sincerely,

Lisa A. Smith

Paralegal

LAS/km Enclosures

TRANSMITTAL LETTER

| TO: Registration Section Division of Corporations | |
|--|---|
| SUBJECT: Hormel Foods Sales, LLC | |
| (Name of Lin | nited Liability Company) |
| The enclosed "Application by Foreign Limited Li. Florida," Certificate of Existence, and check are s liability company to transact business in Florida | ability Company for Authorization to Transact Business in ubmitted to register the above referenced foreign limited |
| Please return all correspondence concerning this r | natter to the following: |
| Lisa Smith | |
| (Na | ame of Person) |
| Hormel Foods Corporation | |
| (Fi | rm/Company) |
| 1 Hormel Place | |
| | (Address) |
| Austin, MN 55912 | |
| (City/Si | tate and Zip Code) |
| For further information concerning this matter, ple | ease call: |
| Lisa Smith | at (507) 437-5944 |
| (Name of Person) | (Area Code & Daytime Telephone Number) |
| STREET ADDRESS: | MAILING ADDRESS: |
| Registration Section | Registration Section |
| Division of Corporations | Division of Corporations |
| 409 E. Gaines Street | P.O. Box 6327 |
| Tallahassee, Florida 32399 | Tallahassee, Florida 32314 |
| Enclosed is a check for the following amount: | |
| ■ \$125.00 Filing Fee □ \$130.00 Filing Fee & Certificate of | ☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate F Status Certified Copy of Status & Certified Copy |

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| (Name of Foreign Limited | Li | ability Company) | | | |
|---|-------------|--|------------|---------------|--|
| Delaware | 3 | 20-1832091 | | | |
| (Jurisdiction under the law of which foreign limited liability company is organized) | | (FEI number, if applicable) | | | |
| 09/20/2004 | 5. | perpetual | | | |
| (Date of Organization) | | (Duration: Year limited liability company exist or "perpetual") | will ce | ase to | |
| 10/31/04 | | | | | |
| (Date first transacted business in F (See sections 608.501 & 608.502 F. | lor S. t | ida, if prior to registration.) o determine penalty liability) | | | |
| 1 Hormel Place | | | | | |
| Austin, MN 55912 | | | | | |
| (Street Addres | s o | f Principal Office) | | | |
| . If limited liability company is a manager-managed company, check here 🗷 | | | | 05. | |
| The name and usual business addresses of the ma | nai | ring members or managers are as follo | lower | Ē | |
| | .iiei į | ging members of managers are as for | iows. | | |
| Jeffrey M. Ettinger, 1 Hormel Place, Austin, MN 55912 | | | | _ | |
| Michael J. McCoy, 1 Hormel Place, Austin, MN 55912 | | | <u> </u> | 1 2: | |
| | | | | 17 | |
| Attached is an original certificate of existence, no more than 90 |) da | rys old, duly authenticated by the official havin | io cristod | vofrece | |
| e jurisdiction under the law of which it is organized. (A photoconslation of the certificate under oath of the translator must be sul | рy | is not acceptable. If the certificate is in a foreign | | | |
| riskatori of the extineate trides earn of the translator musice sur | OIII | nea.) | | | |
| . Nature of business or purposes to be conducted of | or į | promoted in Florida: | | | |
| The solicitation of orders for wholesale food and food produ | ıcts | | | | |
| Brian D. C | \int_{t} | Shugon | | | |
| Signature of a member or an a (In accordance with section 608.408(3), an affirmation under the penalties of per | F.S | norized representative of a member. ., the execution of this document constitutes y that the facts stated herein are true.) | | | |
| Brian D. Johnson, Assistant Secreta | | , | | | |

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

| Hormel Foods Sal | es, LLC | ·· | | |
|--|--|--|--|--|
| 2. The name ar | nd the Florida street address o | of the registered a | gent and office are: | |
| | ст | Corporation System | | |
| | | (Name) | | |
| | | South Pine Island Ro | | |
| | Florida Street Adda | ress (P.O. Box <u>NOT</u> | ACCEPTABLE) | |
| | Plantation | | 33324 | |
| | | City/State/Zip | | |
| liability compan agent and agree relating to the p | med as registered agent and to to at the place designated in the to act in this capacity. I furth roper and complete performan ty position as registered agent | is certificate, I her ter agree to compl nce of my duties, a | reby accept the appoin y with the provisions o nd I am familiar with a | tment as registered of all statutes and accept the |
| ву: М. Т. | CT Corporation System (Signature) | M.C. 8 Assist | ummer PaVon ant Secretary | |

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)\$ 5.00 Certificate of Status (optional)



PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HORMEL FOODS SALES, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIRST DAY OF JUNE, A.D. 2005.



Warriet Smith Hindson
Harriet Smith Windson, Secretary of State

AUTHENTICATION: 3918923

DATE: 06-01-05

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