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ORIDA/FOREIGN LIMITED LIABILITY CO.

Black River Asset Management LLC

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EXAMINER

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;

2. The D. S. A. and A.
[Name of Foreign Limited Liability Company; must include "Limited Liability Company," "[.L.C.," or "L.L.C.)
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")
2. Dolaware 3. 41-2066451
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4. 10/04/2002 (Date of Organization) 5. Perpotual (Duration: Year limited liability company will cease to exist or "perpetual")
6.
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 12700 Whitewater Drive, Minnetonka, MN 55343
(Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here
9. The name and usual business addresses of the managing members or managers are as follows:
Member: Cargill Financial Services Corporation
12700 Whitewater Drive Minnetopka, MN 55343
10. Attached is an original certificate offexistence, normore than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida:
SEE ATTACHMENT
Dail A. Rolutson
Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true?
David A. Robertson, Assistant Secretary of
Typed or printed name of signee
Cargill Financial Services Corporation

Attachment to Florida
Nature of the LLC's Business

To engage in any and all lawful purposes for which LLCs may be permitted under the FL Limited Liability Company Act

)8 AUG 27 AM 8: 01

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 Con	pany is:				
Black River Ass	et Management LLC					
If name unava	ailable, the alternate name to	be used in the state	of Florida is:			
2. The name a	and the Florida street addres	s of the registered a	gent and office are:			
	С	T Corporation System				
		(Name)				
	120	0 South Pine Island Ros	ad	•		
	Florida Street Address (P.O. Box NOT ACCEPTABLE)					
	Plantation	FI.	33324			
	, , , ,	City/State/Zip				
liability compa ugent und agre relating to the p	amed as registered agent and iny at the place designated in the to act in this capacity. I full broper and complete performing position as registered age. CT Corporation System	this certificate, I her ther agree to compl ance of my duties, a	reby accept the appoin y with the provisions o nd I am familiar with a	tment as registered fall statutes and accept the		
- Marxon	(Signature) Assis	stant S ecretai	ry			
	\$ 100.00 \$ 25.00		pplication Registered Agent			
	\$ 30.00					
	\$ 5.00					

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BLACK RIVER ASSET MANAGEMENT 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 TWENTIETH DAY OF AUGUST, A.D. 2008.

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

Harriet Smith Windsor, Secretary of State AUTHENTICATION: 6802695

DATE: 08-20-08