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	Division of Con	porations	and in
	Fax Number	: (850)617-5383	and After
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From:	\$ 5 35 	: C T CORPORATION	SYSTEM HIGH 16 14
	Account Name		9191014
	Account Number	: FCA000000023	
	Thoma	· (050)222-1092	(100,01,00

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Mead Johnson & Company, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

C. LEWIS FEB 2 4 2010

EXAMINER

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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporati	Ons		
SUBJECT: Mead Johnson &	: Company, LLC		
		mited Liability Company	
Existence, and check are subm	itted to register the above ref	brenced foreign limited liabi	Fransact Business in Florida," Certifica lity company to transact business in Flo
Please return all correspondent	e concerning this matter to t	he following:	
/ Ad	irlsa Mollinan		
		lame of Person	
	lead Johnson		
L	· F	іпп/Сопрапу	
1	101 Patotot Blud	•	
·		Address	
. 1			
	enview, IL 600	126 tate and Zip Code	
	City/s	tate and ZIP Code	
·		gh@meadjohnson.com	
	E-mail address: (to be use	for future annual report not	ification)
For further information concern	ing this matter, please call:		•,
Max Bode		at (312) 2.81	(3502
Name	of Person Are	a Code & Daytime Telephon	e Number
MAILING ADDRESS Division of Corporation Registration Section	is Divisio Registr	ET ADDRESS: n of Corporations ation Section	
P.O. Box 6327 Tallahassee, FL 32314	2661 E	Building xecutive Center Circle ssee, FL 32301	
Enclosed is a check for the	following amount:		
□ \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Fee & Certified Copy	☐ \$160.00 Filing Pee, Certificate .of Status & Certified Copy
		•	

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HARRITTY COMPANY TO TRANSACT RUSINESS IN THE STATE OF RECORDA!

•	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
ons	ame unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the went of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability pany," "L.L.C," "LLC.")
75	claware arisdiction under the law of which foreign limited liability (FEI number, if applicable)
. <u>l</u>	2/01/2009 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
i	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
. 2	701 Patriot Blvd., 4th Floor, Glenview, 1L 60026 (Street Address of Principal Office) LCC The strict Blvd., 4th Floor, Glenview, 1L 60026 (Street Address of Principal Office)
_	(Street Address of Principal Office)
. If	limited liability company is a manager-managed company, check here
T	he name and usual business addresses of the managing members or managers are as follows:
2	701 Patriot Blvd., 4th Floor, Glenview, IL 60026
	Member: Mead Johnson Nutrition Company
_	
فسارة	tached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of record addition under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a tion of the certificate under oath of the translator must be submitted.)
. N	lature of business or purposes to be conducted or promoted in Florida: Any lawful act or activity for
wh	ich limited liability companies may be organized to do in the State of Florida
	Kunn Wilson
	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 penaltics of parjury that the facts stated barein are true.)

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.

	the alternate to be	used in th	he state of Florida is:	
2. The name a	nd the Florida stree	t address	of the registered agent and office are:	
,				_ =
			TO CO. IN CONTRACT	2010 FEB 23 SECRETARS TALLAHASS
,		Ç 7	Corporation System (Name)	C9 77
	•		(Marrie)	五 8
				5 E C
			South Pine Island Road	~ ~
	Florida	Street Add	dress (P.O. Box NOT ACCEPTABLE)	空军 至
				5 S
		Plan	itation FL 33324	FLORID
			City/State/Zip	500
	•			•
liability compai agent and agree relating to the p	ty at the place design to act in this capac roper and complete y position as registe	nated in ti ity. I furti performa	to accept service of process for the above stat his certificate, I hereby accept the appointmen ther agree to comply with the provisions of all more of my duties, and I am familiar with and i t as provided for in Chapter 608, Florida Stat	nt as registered statutes accept the
By: B 1/	A Bernadette McNamara			
<u> </u>	(Signature)	 	nt Secretary	•
•		\$ 100.00	Filing Fee for Application	
	•	25.00		
		30.00	Certified Copy (optional)	

Cortificate of Status (optional)

Delaware

מאכם

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MEAD JOHNSON & COMPANY, 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 NINETEENTH DAY OF FEBRUARY, A.D. 2010.

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

AND I DO HEREHY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

0664318 8300

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You may warify this destisionts online at corp. delawate.gov/authors.ahtml

Jeffrey W. Bullock, Secretary of State

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DATE: 02-19-10