Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000231431 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA00000023

Phone Fax Number : (850)222-1092 : (850)878-5368

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

Panil	Address:			
	AUUL BOS.			

Foreign Limited Liability Company **AGI North America LLC**

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

J. SAULSBERRY **EXAMINER**

SEP 23 2011

COVER LETTER

SUBJECT: AGI NO	orth America L	Name of Limited Liability Company			•
he enclosed "Application xistence, and check are	n by Foreign Limited L submitted to register the	ability Company for Authorization to Transact Business above referenced foreign limited liability company to	s in Florida," Co transact business	ertificate s in Flori	of ida
lease return all correspon	ndence concerning this	matter to the following:			
Justin	Bintrim				
	-	Name of Person			
Pillsbu	iry Winthrop Shav	v Pittman LLP			
		Firm/Сотрапу	ALI	201	
2300	N St. NW		AH) SEP 22	•
		Address	ASSE	2	
Washi	ngton, DC 20037	•	Y 0F	AH	į
		City/State and Zip Code	ST.		í
justin.	.bintrim@pillsb	urylaw.com	ATE RID	8: 0	•
4.,	E-mail address	: (to be used for future annual report notification)			
or further information co	ncerning this matter, pl	ease call:			
Justin Bintr	im	_{at (} 202) 663-8364			
	Name of Person	Area Code & Daytime Telephone Number			
MAILING ADD Division of Corp Registration Sect P.O. Box 6327 Tallahassee, FL 3	orations ion	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
nclosed is a check fo		Fee & \$155.00 Filing Fee & \$160.00 Filing F			

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: AGI North America LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (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. Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 5. perpetual 4 9/8/2010 (Duration: Year limited liability company will cease to (Date of Organization) exist or "perpetual") 6. N/A (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 1950 N Ruby St. Melrose Park, IL 60160 (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: AGI Holdings LLC One Sound Shore Dr. Greenwich, CT 06830 10. Attached is an original certificate of existence, no more 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: Sales

Signature of a member or an authorized representative of a member.

(In accordance with section 508.408(3), F.S., the execution of this document constitutes an affirmation under the penaltics of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

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 Cor	mpany is:	
AGI Nort	h America LLC		
If unavailable	, the alternate to be used in	the state of Florida is:	
2. The name	and the Florida street addres	ss of the registered agent and office a	2011 SEP 22 AM 8: 0 SECRETARY OF STATE TALLAHASSEE. FLORID
	CT Corporation System	em	P X
		(Name)	RY 6
	1200 South Pine Is	land Road	F.S.
	Florida Street A	Address (P.O. Box NOT ACCEPTABLE)	8: 01 TATE ORIDA
	Plantation	FL 33324	
		City/State/Zip	
liability compo agent and agre relating to the	any at the place designated in se to act in this capacity. I fu proper and complete perform my position as registered ago	d to accept service of process for the and this certificate, I hereby accept the appropriate agree to comply with the provision nance of my duties, and I am familian the ent as provided for in Chapter 608, Fla	opointment as registered ons of all statutes with and accept the orida Statutes. Rhiannon Lawler Vice President
	\$ 100.0 \$ 25.0 \$ 30.0	0 Designation of Registered Agen	and Assistant Secretary
	\$ 5.00		

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AGI NORTH AMERICA 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 NINTH DAY OF SEPTEMBER, A.D. 2011.

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

AUTHENTY CATION: 9019407

DATE: 09-09-11