# M12000000130

(Requestor's Name)		
. (Address)		
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PICK-UP WAIT MAIL		
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B. KOHR

JAN - 9 2012

**EXAMINER** 



200215480352

DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RECEIVED

12 JAN -6 PH 2: 22

SECRETARY OF STATE DIVISION OF CORPORATIONS



### FLORIDA DEPARTMENT OF STATE Division of Corporations

January 9, 2012

STEPHANIE MILNES CSC TALLAHASSEE, FL

SUBJECT: GAVILON INGREDIENTS, LLC

Ref. Number: W12000001113

We have received your document for GAVILON INGREDIENTS, LLC and the authorization to debit your account in the amount of \$125.00. However, the document has not been filed and is being returned for the following:

In Item 9, please list the NAMES and ADDRESSES of the company's MANAGERS or MANAGING MEMBERS.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Regulatory Specialist II

Letter Number: 612A00000431



ACCOUNT NO. : 12000000195

REFERENCE : 035347 4305223

AUTHORIZATION

COST LIMIT U:

ORDER DATE: December 21, 2011

ORDER TIME : 1:54 PM

ORDER NO. : 035347-025

CUSTOMER NO: 4305223

#### FOREIGN FILINGS

NAME: GAVILON INGREDIENTS, LLC

Rubmission date as file date.

XXXX\_ QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY \_ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Stephanie Milnes -- EXT# 2920

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 LARIE BY COMPANY TO TRANSACT RUSINESS IN THE STATE OF FLORIDA:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE S	STATE OF FLORIDA:
1. GAVILON INGREDIENTS, LLC	
(Name of Foreign Limited Liability Company; must includ	e "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 altern	nate name. The alternate name must include "Limited Liability
Company," "L.L.C," "LLC.")	
2. DELAWARE 3.	61-1668402
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4, 12/09/2011 5.	PERPETUAL L
(Date of Organization)	(Duration: Year limited liability company will cease to
	exist or "perpetual")
6.	
(Date first transacted business in Flor (See sections 608.501 & 608.502 F.S. t	exist or "perpetual")  ida, if prior to registration.) o determine penalty liability)
· · · · · · · · · · · · · · · · · · ·	o determine penalty nationally)
7. 11 CONAGRA DRIVE, OMAHA, NE 68102	
	22
(Street Address o	f Principal Office)
(chook Hadioss of	. This par of moon
8. If limited liability company is a manager-managed c	ompany, check here
, , ,	-
9. The name and usual business addresses of the management	ging members or managers are as follows:
O 11 April 1 Turns IIC	
Gavilon Agriculture, LLC	
ll Conagra Drive	
Omaha, NE 68102	
	ys old, duly authenticated by the official having custody of records in
the jurisdiction under the law of which it is organized. (A photocopy	
translation of the certificate under oath of the translator must be submi	med)
11. Nature of business or purposes to be conducted or p	promoted in Florida:
COMMODITIES MANAGEMENT	
	/
(Mawala/	
Signature of a member or an auth	norized representative of a member.
	ion of this document constitutes an affirmation under the
penalties of perjury that the facts stated herein are true.	I am aware that any false information submitted in a
	a third degree felony as provided for in s.817.155, F.S.)
JOHN W. NEPPL, CHIEF FINA	NCIAL OFFICER

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:		
GAVILON INGREDIENTS, LLC		
If unavailable, the alternate to be used in the state of Florida is:		
2. The name and the Florida street address of the registered agent and office are:		
Corporation Service Company		
(Name)		
1201 Hays Street		
Florida Street Address (P.O. Box NOT ACCEPTABLE)		
Tallahassee FL 32301		
City/State/Zip		
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registere agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.  Corporation Service Company  By:  (Signature)  AMY GUDGEL, ASST. V.P.		
\$ 100.00 Filing Fee for Application		

\$ 25.00 Designation of Registered Agent Certified Copy (optional)

5.00 Certificate of Status (optional)

\$ 30.00

## Delaware

PAGE

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "GAVILON INGREDIENTS, 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 FOURTH DAY OF JANUARY, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GAVILON INGREDIENTS, LLC" WAS FORMED ON THE NINTH DAY OF DECEMBER, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5077614 8300

120010415

AUTHENTICATION: 9271633

DATE: 01-04-12

You may verify this certificate online at corp.delaware.gov/authver.shtml