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CONTACT:	RICKY SO	<u>10</u>	
DATE:	08/01/2013		
REF. #:	<u>8850909</u>		
CORP. NAME:	CHOICE G	ENETICS USA, LLC	
( ) ARTICLES OF INCOME. ( ) ANNUAL REPORT (XX) FOREIGN QUALIFICATE OF CARROLLE	CATION	( ) TRADEMARK/SERVICE MARK ( ) LIMITED PARTNERSHIP ( ) MERGER	( ) ARTICLES OF DISSOLUTION ( ) FICTITIOUS NAME ( ) LIMITED LIABILITY ( ) WITHDRAWAL
		TH CHECK# <u>70005557</u> FOR S	
		COST LI	MIT: \$
PLEASE RETUR	N:		
(XX) CERTIFIED COP		ERTIFICATE OF GOOD STANDING	( ) PLAIN STAMPED COPY

Examiner's Initials

### 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: Choice Genetics USA, 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.") (Jurisdiction under the law of which foreign limited liability company is organized) 05/30/1996 perpetual
(Duration: Year limited liability company will cease to (Date of Organization) exist or "perpetual") 08/06/2013 (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 5058 Grand Ridge Dr., Suite 200 **West Des Moines** (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: see attached 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: Company CFO moving to Florida, clerical work from home office, 3321 W Shell Point Rd, Ruskin, FL 33570-3030 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, 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.) Brent W. Mitchell, COO

Typed or printed name of signee

Phone #	Fiscal Year	Title of Officer & for Director (Manager & for Member, if an LLC) (Partners if an LP)		Address if dilf than Principal Office Address
515-225-9420 x 2221 ask for Doreen Dec		Manager(Director)	Frederic Grimaud	La corbiere, 49450 Roussay, France
	CEO Mark Weaver		1792 Glenleven Terrace, West Des Moines, IA 50266	
	Manager(Director) Filip Ackerr		Weidestraat 52, 1650 Beersel, Belguim	
	r Doreen COO		Brent W Mitchell	11268 NW 114th Ave, Granger, IA 50109
	Manager(Director)	Pieter Antoon Seghers	Winterpoel 1, 1840 Londerzeel, Belguim	
	CFO	George Lindsey	3321 W Shell Point Rd, Ruskin, FL 33570-3030	

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## 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:					
Choice Gen	etics USA, LI	LC				
If unavailable, the alternate to be used in the sta	ite of Florida	is:				
2. The name and the Florida street address of the	ne registered	agent and office are:				
National Corporate Research, Ltd., Inc.						
	(Name)					
155 Offi	ce Plaza Driv	6				
Florida Street Address	(P.O. Box <u>NO</u>	T 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 registered 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.

(Signature)
Rose Marie Cole, Asst. Secretary

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

SECRETARY OF SAMING



#### SECRETARY OF STAT

#### CERTIFICATE OF EXISTENCE

Date: 7/12/2013

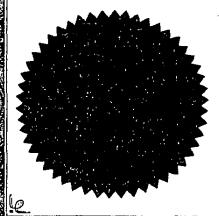
Name: CHOICE GENETICS USA, LLC (489DLC - 196290)

Date of Incorporation: 5/30/1996

Duration: 5/30/2026

I, Matt Schultz, Secretary of State of the State of Iowa, custodian of the records of incorporations, certify the following for the limited liability company named on this certificate:

- a. The entity is in existence and duly incorporated under the laws of Iowa.
- b. All fees, taxes and penalties required under the Revised Uniform Limited Liability Company Act and other laws due the Secretary of State have been paid.
- c. The most recent biennial report required has been filed with the Secretary of State.
- d. The Secretary of State has not administratively dissolved the limited liability company.
- e. The Secretary of State has not filed either a statement of dissolution or statement of termination.



TARY OF STATE