(1/5)

Page 1 of 1

## Florida Department of State

**Division of Corporations** Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (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.\*\*

Email Address:

### Foreign Limited Liability Company Tampa Port Services, LLC

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Helisamoris AUG 2 1 2013

CR2E027 (9/10)  COVER LETTER
TO: Registration Section Division of Corporations
Tampa Port Services, LLC SUBJECT:
Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter to the following:
Nancy L. Chadwick
Name of Person
The Mossie Company
Firm/Company
3033 Campus Drive, Sulte E490
Address
Plymouth, MN 55441
City/State and Zip Code
karl.metzler@mosaleco.com
karl.metzler@mosalcco.com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Nancy L. Chadwick 763 577.2859
Name of Person Area Code & Daytime Telephone Number
Name of Person  Area Code & Daytime Telephone Number  MAILING ADDRESS:  Division of Corporations  Registration Section  P.O. Box 6327  Tallahassee, FL 32314  Area Code & Daytime Telephone Number  STREET ADDRESS:  Division of Corporations  Registration Section  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32314
Enclosed is a check for the following amount:  \$\Begin{array} \Boxed{1} \\$ \\$ \\$ \\$ \\$ \\$ \\$ \\$ \\$ \\$ \\$ \\$ \\$

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

(Name of Foreign Limited Liability Company; must includ	e "Limited Liability Company," "L.L.C.," or "LLC.")
name unavailable, enter alternate name adopted for the purpose insent of the managers or managing members adopting the alternompany," "L.IC," "LLC.")	e of transacting business in Florida and attach a copy of the written nate name. The atternate name must include "Limited Liability
Delaware 3.	
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
August 20, 2013 5.	Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
August 20, 2013	
(Date first transacted business in Flor (See sections 608.501 & 608.502 F.S.	<i>→</i>
3033 Campus Drive, Suite E490	- <u>Γή</u> ω
Plymouth, MN 53441	
(Street Address o	of Principal Office)
If limited liability company is a manager-managed	company, check here
The name and usual business addresses of the mans	
Mosaic Pertilizer, LLC, 13830 Circa Crossing Drive, Lithia,	
	days old, duly authenticated by the official having custody of records in
e jurisdiction under the law of which it is organized. (A photocop anslation of the certificate under eath of the translator must be sub-	mitted.)
1. Nature of business or purposes to be conducted or	promoted in Florida: Own real property or any other
lawful purpose or setivity permitted under the Florida Limite	•
Marcy Z. Ch	
	ales al 1 de la compansión de la compans
Signature of a member or an au	
Signature of a member or an au  (In accordance with section 608,408(3), F.S., the executed beroin are true.	ution of this document constitutes an affirmation under the re. I am aware that any false information submitted in a
Signature of a member or an au  (In accordance with section 608.408(3), F.S., the executed bernin are true.	artion of this document constitutes an affirmation under the

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.307, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

Tampa Port Service  If unavailable, t		ed in the state of Florida is:	<del></del>
2. The name an	nd the Florida street	address of the registered agent and office are:	<del></del>
		C T Corporation System	£3
	<del></del>	(Name)	— <u>*</u> }%
		1200 South Pinc Island Road	AUG 20 CHETAK LAHASS
	Florida	Street Address (P.O. Box NOT ACCEPTABLE)	7 20 N
	Plantation	FL 33324	A CONTRACT OF THE PROPERTY OF
		City/State/Zip	- AR
liability compar registered agen statutes relating	ny at the place design t and agree to act in g to the proper and c	gent and to accept service of process for the abor- mated in this certificate, I hereby accept the appo- this capacity. I further agree to comply with the omplete performance of my duties, and I am fam n as registered agent as provided for in Chapter	ointment as e provisions of all ullar with and e 608, Florida
	CTC	Orporation System . h Jeanne	Neison

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

# Delaware

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TAMPA PORT SERVICES, 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. 2013.

5383898 8300

131005927

AUTHENTICATION: 0676994

DATE: 08-20-13