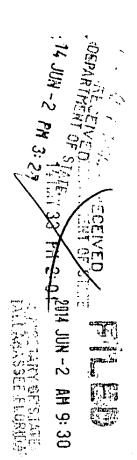
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(Req	uestor's Name)	<u></u>			
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Special Instructions to Fi	lling Officer:				
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Office Use Only



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ACCOUNT NO. : I2000000195

REFERENCE :

126419 4353856

AUTHORIZATION

COST LIMIT

ORDER DATE: May 9, 2014

ORDER TIME : 1:24 PM

ORDER NO. : 126419-080

CUSTOMER NO: 4353856

FOREIGN FILINGS

NAME: CONAGRA FOODS SALES, LLC

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Gray -- EXT# 62925

EXAMINER:

COVER LETTER

ConAgra Foods Sales, LLC

TO:

Registration Section
Division of Corporations

Enclosed is a check for the following amount:

☐ \$130.00 Filing Fee &

Certificate of Status

□ \$125.00 Filing Fee

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: Jill Grob Name of Person ConAgra Foods, Inc. Firm/Company One ConAgra Drive 1-237 Address Omaha NE 68102 City/State and Zip Code iill.grob@conagrafoods.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Jill Grob Name of Contact Person STREET ADDRESS: **MAILING ADDRESS:** Division of Corporations Division of Corporations Registration Section Registration Section Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301

□ \$155.00 Filing Fee &

Certified Copy

□ \$160.00 Filing Fee, Certificate

of Status & Certified Copy

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

6.0444

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1 ConAgra Foods Sales, 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. The alternate name must include "Limit Liability Company," "L.L.C." or "LLC.")	led
_{2.} DE 3. 20-8595524	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
₄ 05/26/2014	
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
One ConAgra Drive, 1-237	
Omaha NE 68102	
(Street Address of Principal Office)	
6. One ConAgra Drive, 1-237	
Omaha NE 68102	
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:	
ConAgra Foods, Inc Member	
One ConAgra Drive, 1-237	
Omaha NE 68102	ALTER TREES
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the office that the following 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 translation of the submitted)	frestan.
Signature of an authorized person (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein 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.)	are true. I

Randall D. Harvey, VP of Member ConAgra Foods, Inc.

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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 Liabilit	ty Compa	ny is:	
ConAgra Food	ls Sales, LLC			
If unavailable	, the alternate to be us	ed in the	state of Florida is:	
2. The name	and the Florida street	address of	f the registered agent and office are:	
	The Prentice-Hall Co	orporation :	System, Inc.	
			(Name)	-
	1201 Hays Street			
	Florida	Street Addre	ress (P.O. Box NOT ACCEPTABLE)	_
	Tallahassee		32301 FL	
			City/State/Zip	-
liability comp registered age statutes relati	any at the place design int and agree to act in ing to the proper and co	nated in th this capac omplete pe	o accept service of process for the above his certificate, I hereby accept the appoin city. I further agree to comply with the pi erformance of my duties, and I am famili dered agent as provided for in Chapter 60	tment as rovisions of all ar with and
Sidiules.	The Prentice-Hall Cor	p System		
	By: Emil	(Signati	Juay Asst VP	JUN-2 AM
	•	\$ 100.00	Filing Fee for Application	i i i
	3	25.00	Designation of Registered Agent	္ႏ္ ယ

Certified Copy (optional)

Certificate of Status (optional)

\$ 30.00

5.00

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "CONAGRA FOODS SALES, 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 THIRTIETH DAY OF MAY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CONAGRA FOODS SALES, LLC" WAS FORMED ON THE TWENTIETH DAY OF FEBRUARY, A.D. 2007.

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

4304139 8300

140765361

Jeffrey W Bullock, Secretary of State
AUTHENTY, CATION: 1412191

DATE: 05-30-14

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