

M18000001916

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(Address)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 26, 2017

CATHERINE WHITE  
1947 BRIARFIELD BLVD  
PO BOX 119  
MAUMEE, OH 43537 US

SUBJECT: PLANT NUTRIENT OPERATIONS LLC  
Ref. Number: W17000101368

We have received your document for PLANT NUTRIENT OPERATIONS LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons  
Regulatory Specialist II

Letter Number: 617A00026054

Please keep original  
file date.  
Thank you!

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TALLAHASSEE, FLORIDA

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Plant Nutrient Operations LLC

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:

Catherine M. White

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Name of Person

The Andersons, Inc.

Firm/Company

1947 Briarfield Blvd.; P.O. Box 119

Address

Maumee, Ohio 43537

City/State and Zip Code

ashley\_brooks@andersonsinc.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Catherine M. White

419

891-2934

Name of Contact Person

at (\_\_\_\_\_)

Area Code

Davtime Telephone Number

**MAILING ADDRESS:**

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

**☐ \$125.00 Filing Fee**

☐ \$130.00 Filing Fee & Certificate of Status

☐ \$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

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. Plant Nutrient Operations LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLC.")

2. Ohio  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 82-1652863  
(FEI number, if applicable)

4. 01/01/2018  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 1947 Briarfield Blvd.  
(Street Address of Principal Office)  
Maumee, Ohio 43537

6. P.O. Box 119  
(Mailing Address)  
1947 Briarfield Blvd.  
Maumee, Ohio 43537

FILED  
DEC 22 AM 9:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: NRAI Services, Inc.

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324  
(City) (Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

[Signature] Asst Secretary  
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>President</u>	<u>William J. Wolf</u> <u>1947 Briarfield Blvd.</u> <u>Maumee, Ohio 43537</u>	<u>Secretary</u>	<u>Naran U. Burchinow</u> <u>1947 Briarfield Blvd.</u> <u>Maumee, Ohio 43537</u>
<u>Treasurer</u>	<u>John Granato</u> <u>1947 Briarfield Blvd.</u> <u>Maumee, Ohio 43537</u>		

(Use attachments if necessary)

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

[Signature]  
Signature of an authorized person

Naran U. Burchinow

Typed or printed name of signer

UNITED STATES OF AMERICA  
STATE OF OHIO  
OFFICE OF THE SECRETARY OF STATE

*I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show PLANT NUTRIENT OPERATIONS LLC, an Ohio For Profit Limited Liability Company, Registration Number 4025407, was organized within the State of Ohio on May 5, 2017, is currently in FULL FORCE AND EFFECT upon the records of this office.*



*Witness my hand and the seal of the  
Secretary of State at Columbus, Ohio  
this 12th day of December, A.D.  
2017.*

*Jon Husted*

Ohio Secretary of State

Validation Number: 201734603068