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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

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## Foreign Limited Liability Company DuPont Industrial Biosciences USA, LLC

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(b)

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

IN COMPLIANCE WITH SECTION (05,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A POREIGN LIMITED LIABILITY

COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: DuPont Industrial Biosciences USA, LLC (Name of Foreign Lumited Liability Company; must include "Limited Liability Company," "L.L.C.," or "[1 C."] (If name convailable, enter attenuate more adopted for the purpose of transacting business in Fiorida, The afternate name must include "Limited Liability Company," "T.L.C." or "LLC." 2. Delaware 3. 82-2015891 (FEI numiber, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) 4. Upon Qualification (Once first transacted highless in Florida, if prior to registration) (See sections (4)5,0904 & 605,0905, F.S. to determine penalty liability) 6. Same 974 Centre Road (Mailing Address) (Street Address of Principal Office) Wilmington, DE 19805 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) C T Corporation System Name: 1200 South Pine Island Road Office Address: , Florida 33324 Plantation (Cis) Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability company of the piece 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. Halden-Michele Holden-Asst Secretary By: C T Corporation System (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/acc Name and Address: Title or Capacity: Name and Address: Title or Capacity: James P. Donaghey Michael P. Heffernan MANAGER MANAGER 974 Centre Road 974 Centre Road Wilmington, DE 19805 Wilmington, DE 19805 Andrew R. Girardi MANAGER 974 Centre Road Wilmington, DE 19805 (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 of an authorized person Loriann Lea Sharpe

Typed or princed name of signes

## Delaware

Page 1

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

DELAWARE, DO HEREBY CERTIFY "DUPONT INDUSTRIAL BIOSCIENCES USA,

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 SEVENTEENTH DAY OF OCTOBER, A.D. 2018.

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

e at corp.delaware.gov/authver.shtm

Authentication: 203628383

Date: 10-17-18

6404287 8300 SR# 20187184419

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