To:	Page 2 of 5	2019-12-23 16:53:08 CST		19542080845 From: Ranae McGraw
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		To: Division of Corporations Fax Number : (850)617-6383 From: Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845		26 PH 4: 46 SSEE. FLORIDA
	20	<pre>**Enter the email address for this business entity annual report mailings. Enter only one email a Email Address:</pre>	to be used fo ddress pleas	or future e.**
	AN 9:	Foreign Limited Liability Comp IMC Chemical North America		
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## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

## IN COMPLIANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED TABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

IMC Chemical North America LLC

	<u>ike e no</u> r			
45-2133980	EC 2			
(PEI manber, if applicable)	- <u>G</u>			
in c.	PM			
(Derin firm) transacted basiners in Pfonda, if prior to registration)				
c/o General Counsel	5 O			
(Mailing Address)	(Mailing Address)			
101 East Kennedy Boulevard, Suite 250	101 East Kennedy Boulevard, Suite 2500			
Tampa, Fl. 33602				
	n Florida The alternate come must include "Limited Liability Company." 45-2133980 3			

Name:	C T Corporation System		
Office Address:	1200 South Pine Island Road		
	Plantation	33324 , Florida	
	(Cuy)	(Zsp code)	

## Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited llability company at the place designated in this application, I hereby accept the appointment as registered agent and ugree 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.

C T Corporation System By: (Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
Manager	Name: James ("Joe") C. O'Rourke	Manager	Name: Clint C. Freeland
Member	Address:	Member	Address: 101 East Kennedy Blvd.
Authorized	Suite 2500	Authorized	Suite 2500
Person	Tampa, FL 33602	Person	Tampa, FL 3360350
President &		SVP & CF	
Manager	Mark J. Isaacson	🗌 Manager	Name: Okechukwu'("Ok") E. Azie
Member	Address:	Member	Address: 13830 Circa Crossing Drive
Authorized	Suite E490	🛄 Authorized	Lithia, FL 33547
Person	Plymouth, MN 55441	Person	
SVP & Con		VP & Trea	
Manager	Name:	🔀 Manoger	Mosaic USA Holdings Inc.
Member	Address: 3033 Campus Drive	X Member	Address: 101 East Kennedy Blvd.
Authorized	Suite E490	Authorized	Suite 2500
Person	Plymouth, MN 55441	Person	Tampa, FL 33602
XOther	Other	Other	Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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.

malha	
Signature of an authorized person	

Mark J. Isaacson, Manager and Senior Vice President and Corporate Secretary

Typed or printed name of righter



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "IMC CHEMICAL NORTH AMERICA 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 TWENTY-THIRD DAY OF DECEMBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.  $\exists \mathcal{L}_{\mathcal{L}} \cong$ 





satury of State

Authentication: 204289028

Date: 12-23-19

2344520 8300 SR# 20198833803

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