

M24000000741

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

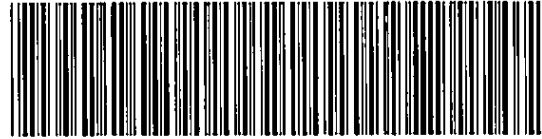
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2024 JAN 22 PM 2:30

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2024 JAN 22 PM 3:11

JAN 23 2024

K. Brumley

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 278527 4305122

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE : January 19, 2024

ORDER TIME : 1:14 PM

ORDER NO. : 278527-010

CUSTOMER NO: 4305122

FOREIGN FILINGS

NAME: 3M INTERAMERICA, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxi's Weiland=sorenson -- EXT# -

EXAMINER: _____

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 3M Interamerica, 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:

Julie A. Taylor

Name of Person

Fredrikson & Byron, PA

Firm/Company

60 S. 6th St., Suite 1500

Address

Minneapolis, MN 55402

City/State and Zip Code

jtaylor@fredlaw.com

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

For further information concerning this matter, please call:

Julie A. Taylor

612

492-7716

Name of Contact Person

at (_____) _____

Area Code

Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☒ \$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. 3M Interamerica, 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 "Limited Liability Company," "L.L.C.," or "LLC.")

2. Delaware 3. 98-0015356
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 12/18/2023
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 3M Center, Bldg 224-5N-40 6. 3M Center, Bldg 220-9E-0
(Street Address of Principal Office) (Mailing Address)
St. Paul, MN 55144-1001 St. Paul, MN 55144-1001

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

Name: Corporation Service Company
Office Address: 1201 Hays Street
Tallahassee, Florida 32301
(City) (Zip code)

2024 JAN 22 PM 2:30

FILED

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.

Corporation Service Company
By: Alexis Weiland-Johnson, ACP
(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:

☒ Manager Name: Leigh Gillett

☐ Member Address: 3M Center, Bldg 220-9E-0

☐ Authorized St. Paul, MN 55144-1001

Person _____

☒ Other Secretary ☐ Other _____

Title or Capacity: Name and Address:

☒ Manager Name: Jennifer K. Marshall

☐ Member Address: 3M Center, Bldg 220-9E-0

☐ Authorized St. Paul, MN 55144-1001

Person _____

☒ Other Vice President ☐ Other _____

☐ Manager Name: Enrique Aguirre Cardozo

☐ Member Address: 3M Center, Bldg 220-9E-0

☐ Authorized St. Paul, MN 55144-1001

Person _____

☒ Other President ☐ Other _____

☐ Manager Name: Rodolfo Espinosa-Casaubon

☐ Member Address: 3M Center, Bldg 220-9E-0

☐ Authorized St. Paul, MN 55144-1001

Person _____

☒ Other Treasurer ☐ Other _____

☐ Manager Name: Justin P. McGough

☐ Member Address: 3M Center, Bldg 220-9E-0

☐ Authorized St. Paul, MN 55144-1001

Person _____

☒ Other Asst. Treasurer ☐ Other _____

☐ Manager Name: Karla M. Stoeckman

☐ Member Address: 3M Center, Bldg 220-9E-0

☐ Authorized St. Paul, MN 55144-1001

Person _____

☒ Other Asst. Secretary ☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed 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.

Karla M. Stoeckman

Signature of an authorized person

Karla M. Stoeckman

Typed or printed name of signee

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "3M INTERAMERICA, 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 NINETEENTH DAY OF JANUARY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "3M INTERAMERICA,
LLC" WAS FORMED ON THE NINETEENTH DAY OF OCTOBER, A.D. 1970.

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



763604 8300

SR# 20240177302

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

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 202626398

Date: 01-19-24