(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Decument Number)						
(Document Number)						
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COVER LETTER

BJECT:	Candor Chemicals LLC Name of Limited Liability Company						
enclosed stence, ar	d "Application by Foreign Limited Liability and check are submitted to register the above	Company for Authorization to Transact Business in Florida," Certif referenced foreign limited liability company to transact business in					
ise return	all correspondence concerning this matter t	to the following:					
	James Stewart						
		Name of Person					
	Candor Chemicals LLC						
		Firm/Company					
	4609 NW 6TH ST STE B7						
		Address					
	GAINESVILLE, FL 32609-4123						
		City/State and Zip Code					
	James. Stewart@candorchemicals.co	om					
	E-mail address: (to be	e used for future annual report notification)					
further in	nformation concerning this matter, please ca	ıll:					
James Stewart		770 4901939					
	Name of Contact Person	Area Code Daytime Telephone Number					
	iling Address:	Street Address:					
Registration Section		Registration Section					
Division of Corporations		Division of Corporations					
P.O. Box 6327		The Centre of Tallahassee					
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					

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:

Candor Chemicals LLO (Name of Foreign	Limited Liability Company; must include "Limited	d Liability	Company," "L.L.C.," or "LLC.")			
Candor Chemicals LLC						
f name unavailable, enter alternate	name adopted for the purpose of transacting business in Fl	lorida The :	hernate name must include "Limited Lial	oility Compa	ny," "L.L	.C," or "L1,C,")
Delaware		3.	93-3147635			
(Jurisdiction under the law of w	hich foreign limited liability company is organized)		(FEI number	r, if applicabl	c)	
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determi	registration) (shilite)			
4609 NW 6TH ST STI			4609 NW 6TH ST STE B7			
treet Address of Principal Office)		6	(Mailing Address)			
GAINESVILLE, FL 33	2609-4123		GAINESVILLE, FL 32609-4	1123		
Name and street address Name:	James Stewart	<u>NOT</u> a	cceptable)) A::::1	24 JUN 14 PM 3:5	
Office Address:	4609 NW 6TH ST STE B7			F STATE	H 3: 57	D
	CAINFOVILLE		, Florida <u>32609-4123</u>			
	GAINESVILLE					
	(City)		(Zip code)			

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:	□Manager	Name: James Siya
■Member	Address: 7916 Butterfield Drive	■Member	Address: 867 Carr Simon
□Authorized	Elkridge, MD 21075	□Authorized	Montreal, QC H4M 2W1 Canada
Person		Person	
□Other	Other	□Other	Other
□Manager	Name: James Stewart	□Manager	Name:
■Member	Address: 400 Peachtree Dunwoody Circle	■Member	Address:
□Authorized	Atlanta, GA 30342	□Authorized	
Person		Person	
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	Other	□Other	□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.

Signature of an authorized person

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "CANDOR CHEMICALS 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 SIXTEENTH DAY OF MARCH, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CANDOR CHEMICALS LLC" WAS FORMED ON THE FOURTH DAY OF AUGUST, A.D. 2023.



Jeffrey W Bullacs, Secretary of State

Authentication: 203040964