

**2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M04000001989

**Entity Name:** MOSAIC FERTILIZER, LLC**Current Principal Place of Business:**101 EAST KENNEDY BLVD  
STE 2500  
TAMPA, FL 33602**Current Mailing Address:**3033 CAMPUS DRIVE  
STE W400  
PLYMOUTH, MN 55441-2651 US**FEI Number:** 36-3892806**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Authorized Person(s) Detail :**

Title	MGR
Name	O'ROURKE, JAMES ("JOC") C
Address	101 EAST KENNEDY BLVD STE 2500
City-State-Zip:	TAMPA FL 33602

Title	MGR
Name	ISAACSON, MARK J
Address	3033 CAMPUS DRIVE STE W400
City-State-Zip:	PLYMOUTH MN 55441-2651

Title	MGR
Name	FREELAND, CLINT C
Address	101 EAST KENNEDY BLVD STE 2500
City-State-Zip:	TAMPA FL 33602

Title	ASSISTANT CORPORATE SECRETARY
Name	PAULSON, BETH
Address	3033 CAMPUS DRIVE STE W400
City-State-Zip:	PLYMOUTH MN 55441-2651

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MARK J. ISAACSONSR. VP AND CORP.  
SECRETARY

04/26/2021

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date