



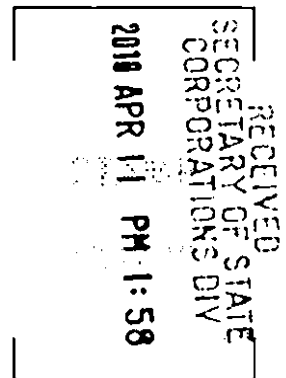
State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

## Certificate of Authority

### FOREIGN Corporation

→ Filing Fee: \$310.00 minimum

Pursuant to the provisions of RIGL 7-1.2-1405, the undersigned foreign corporation hereby applies for a Certificate of Authority to transact business in the State of Rhode Island, and for that purpose submits the following statement:



1. The name of the corporation is:  Corteva, Inc.		
2. It is incorporated under the laws of: Delaware		
3. The name, if different, which it elects to use in Rhode Island is:  (a) If the name of the corporation in its jurisdiction of incorporation does not contain the word "corporation", "company", "incorporated", or "limited," or an abbreviation thereof, then list the name of the corporation with the addition of one of the above corporate endings for use in Rhode Island:  (b) If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation will qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this application:		
4. The date of its incorporation is: 03/16/2018  And the period of its duration is: <b>CHECK ONLY ONE BOX</b> <input checked="" type="checkbox"/> Perpetual (on-going) <input type="checkbox"/> Date certain for dissolution _____		
5. The address of its principal office is:  974 Centre Road, Wilmington, DE 19805		
6. The name and address of the initial registered agent/office of in Rhode Island:		
Agent Name C T Corporation System		
Street Address ( <u>NOT</u> a P.O. Box) 450 Veterans Memorial Parkway, Suite 7A		
City/Town East Providence	State RHODE ISLAND	Zip Code 02914

#### MAIL TO:

Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov

**FILED**  
 1:58  
 APR 11 2018  
 BY 02328512

FORM 150 - Revised: 08/2016

7. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:

SEE ATTACHMENT

8. (a) The names and respective addresses of its directors (optional, unless directors are required under the laws of the state or country of which it is incorporated):

NAME	ADDRESS
Michael P. Heffernan	974 Centre Road, Wilmington, DE 19805
Andrew R. Girardi	974 Centre Road, Wilmington, DE 19805
James P. Donaghey	974 Centre Road, Wilmington, DE 19805

Check the box to indicate an attachment. ☐

8. (b) The names and respective addresses of its principal officers (mandatory if directors are not required under the laws of the state or country of which it is incorporated):

OFFICE	NAME	ADDRESS
PRESIDENT	Michael P. Heffernan	974 Centre Road, Wilmington, DE 19805
VICE PRESIDENT	Andrew R. Girardi	974 Centre Road, Wilmington, DE 19805
TREASURER	Andrew R. Girardi	974 Centre Road, Wilmington, DE 19805
SECRETARY	Loriann Lea Sharpe	974 Centre Road, Wilmington, DE 19805

Check the box to indicate an attachment. ☒

9. The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

NUMBER OF SHARES	CLASS	SERIES	PAR VALUE OR STATE NO PAR VALUE
1,000	Common		\$0.0100

10. (a) Estimate, in dollars, the value of all property to be owned by the corporation for the following year, wherever located:


\$ 0.0000

(b) Estimate, in dollars, the value of the corporation's property to be located within Rhode Island during the following year:

\$ 0.0000

(c) Estimate, as a percentage, the proportion that the estimated value of the property of the corporation to be located within this state during the following year bears to the value of all property of the corporation to be owned during the following year, wherever located. Note: Divide (10b) by (10a) and multiply by 100 to obtain the percentage.

0 %

11. (a) Estimate, in dollars, the gross amount of business to be transacted by the corporation during the following year.  <div style="text-align: right;">\$ 0.0000</div>	(b) Estimate, in dollars, the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year.  <div style="text-align: right;">\$ 0.0000</div>
(c) Estimate, <b>as a percentage</b> , the proportion of the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year compared to the gross amount thereof which will be transacted by the corporation during the following year. <i>Note: Divide (11b) by (11a) and multiply by 100 to obtain the percentage.</i>  <div style="text-align: right;">0 %</div>	
12. This application must be accompanied by a Certificate of Good Standing/Letter of Status issued by the proper officer of the state or country under the laws of which it is incorporated that is dated within 60 days of the filing of this document.	
13. Date when the Certificate of Authority will be effective: <b>CHECK ONLY ONE BOX</b>	
<input checked="" type="checkbox"/> Date received (Upon filing)	
<input type="checkbox"/> Later effective date (Date must be no more than 90 days from the day of filing) _____	
<i>Under penalty of perjury, I declare and affirm that I have examined this Application for Certificate of Authority, including any accompanying attachments, and that all statements contained herein are true and correct.</i>	
Type or Print Name of Authorized Officer  Lorianne Lea Sharpe	Date  <div style="font-size: 1.2em;">4/6/2018</div>
Signature of Authorized Officer of the Corporation 	

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email [corporations@sos.ri.gov](mailto:corporations@sos.ri.gov).

FORM 150 - Revised: 08/2016

**Attachment to Rhode Island****Corporate Purposes**

Make, hold and direct investments and activities of its subsidiaries and to engage in any lawful act or activity for which corporations may be organized to do business under the laws of its jurisdiction of incorporation.

Notwithstanding the foregoing, the purpose of the corporation is to engage in any lawful act or activity for which corporations may be organized to do business under the laws of its jurisdiction of incorporation.

**Officers & Directors**

- 1 Full Name: James P. Donaghey  
Officer/Director: Officer, Director  
Officer's Title: Vice President  
Business Address: 974 Centre Road  
City: Wilmington  
State: DE  
ZIP Code: 19805
- 2 Full Name: James P. Donaghey  
Officer/Director: Officer  
Officer's Title: Assistant Treasurer  
Business Address: 974 Centre Road  
City: Wilmington  
State: DE  
ZIP Code: 19805
- 3 Full Name: Calissa W. Brown  
Officer/Director: Officer  
Officer's Title: Vice President  
Business Address: 974 Centre Road  
City: Wilmington  
State: DE  
ZIP Code: 19805
- 4 Full Name: Calissa W. Brown  
Officer/Director: Officer  
Officer's Title: Assistant Secretary  
Business Address: 974 Centre Road  
City: Wilmington  
State: DE  
ZIP Code: 19805
- 5 Full Name: Sharon E. Smith  
Officer/Director: Officer  
Officer's Title: Vice President  
Business Address: 974 Centre Road  
City: Wilmington  
State: DE  
ZIP Code: 19805
- 6 Full Name: Sharon E. Smith  
Officer/Director: Officer  
Officer's Title: Assistant Treasurer  
Business Address: 974 Centre Road  
City: Wilmington  
State: DE  
ZIP Code: 19805

7	Full Name:	Robert J. Tuinstra Jr.
	Officer/Director:	Officer
	Officer's Title:	Assistant Treasurer
	Business Address:	974 Centre Road
	City:	Wilmington
	State:	DE
	ZIP Code:	19805

# Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CORTEVA, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TENTH DAY OF APRIL, A.D. 2018.

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

RECEIVED  
SECRETARY OF STATE  
CORPORATIONS DIV  
2018 APR 11 PM 1:59



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SR# 20182569999

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://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.

Jeffrey W. Bullock, Secretary of State

Authentication: 202484742

Date: 04-10-18



State of Rhode Island and Providence Plantations  
**Department of State | Office of the Secretary of State**  
**Nellie M. Gorbea**, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island  
and Providence Plantations, hereby certify that this document, duly executed in  
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as  
amended, has been filed in this office on this day:

April 11, 2018 01:58 PM

The signature is written in a cursive, flowing style in blue ink. It appears to read "Nellie M. Gorbea".

Nellie M. Gorbea  
*Secretary of State*

