## State of Idaho

Office of the Secretary of State

**CERTIFICATE OF WITHDRAWAL** 

**OF** 

ADM/FARMLAND, INC.

File Number C 141013

I, PETE T. CENARRUSA, secretary of State of the State of Idaho, hereby certify that Application for Certificate of Withdrawal from this State, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Withdrawal and attach hereto a duplicate of the Application for such Certificate.

Dated: September 16, 2002



Pet 17 Cemeruse SECRETARY OF STATE

By Dreyl Dewner



## APPLICATION FOR CERTIFICATE OF WITHDRAWAL

02 SEP 16 AH 11: 35

(Instructions on back of application)

STATE OF IDAHO

| То  | the Secretary of State of Idaho Pursuant to Section 30-1-1520, <b>Idaho Code</b> , the undersi certificate of withdrawal from the State of Idaho, and for t   | gned Corporation hereby applies for a hat purpose submits the following statement: |
|-----|---|--|
| 1.  | The name of the corporation is ADM/Farmland, Inc.   |  |
|     | The name which it used in Idaho is ADM/Farmland, Inc.   |  |
| 2.  | It is incorporated under the laws of Delaware   |  |
| 3.  | It is not transacting business in the State of Idaho.   |  |
| 4.  | It hereby surrenders its authority to transact business in  | said state.  |
| 5.  | It revokes the authority of its registered agent in the State of Idaho to accept service of process and consents that service of process in any action, suit or proceeding based upon any cause of action arising in the State of Idaho during the time it was authorized to transact business therein may thereafter be made on it by registered or certified mail to the corporation at the address listed in item 6., below. |  |
| 6.  | The post office address to which process against the corporation may be mailed is   |  |
|     | 4666 Faries Parkway, P.O. Box 1470, Decatur, IL 62525   |  |
| 7.  | It agrees to notify the Secretary of State of the State of I  | daho of any change to the address in Item 6.                                       |
|     |   |  |
|     |   |  |
|     |   | Customer Acct #:   |
| Sig | nature Andrews  | Customer Acct # :  (if using pre-paid account)  Secretary of State use only        |
|     | nature  | (if using pre-paid account)  |