

**Commonwealth of Kentucky**  
**Michael G. Adams, Secretary of State**

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Michael G. Adams  
KY Secretary of State  
Received and Filed

3/19/2025 12:00:00 AM

Fee receipt: \$3,336.00

Michael G. Adams  
Secretary of State  
P. O. Box 718  
Frankfort, KY 40602-0718  
(502) 564-3490  
<http://www.sos.ky.gov>

**Certificate of Authority**

**RCA**

Pursuant to the provisions of KRS 14A.9 - 030 the undersigned hereby applies for authority to transact business in Kentucky on behalf of the entity named below and, for that purpose, submits the following statements.

1. The business entity is a limited partnership.
2. The name of the entity is: GENESIS ALKALI WYOMING, LP
3. It is an entity organized and existing under the laws of the state of Delaware.
4. The date of organization is See Original Certificate of Authority. and the period of duration is perpetual

**Principal Office**

FMC WYOMING CORPORATION  
1735 MARKET ST.  
PHILADELPHIA, PA 19103

**Registered Agent Name/Address**

CT Corporation System  
306 W. Main St., Ste. 512  
Frankfort, KY 40601

6. Joshua Newton, Staff Accountant, on 3/19/2025

7. I, CT Corporation System, consent to serve as the registered agent on behalf of the this entity on 3/19/2025