

B2000000052

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

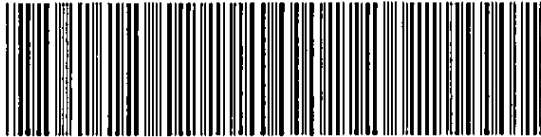
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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FILE 2ND

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 197895 7597055
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 1000.00

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TALLAHASSEE, FLORIDA

ORDER DATE : March 2, 2020
ORDER TIME : 11:45 AM
ORDER NO. : 197895-010
CUSTOMER NO: 7597055

FOREIGN FILINGS

NAME: TRIAN FUND MANAGEMENT, L.P.

XXXX QUALIFICATION (TYPE: LP)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- _____ CERTIFIED COPY
- ZZ _____ PLAIN STAMPED COPY
- _____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT# 62969

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Trian Fund Management, L.P.
Name of Foreign Limited Partnership or Limited Liability Limited Partnership

The enclosed application, certificate of status and fees are submitted to register a foreign limited partnership or limited liability limited partnership to transact business in Florida.
Please return all correspondence concerning this matter to:

Stuart I. Rosen
Contact Person
Trian Fund Management, L.P.
Firm/Company
280 Park Avenue, 41st Floor
Address
New York, NY 10017
City, State and Zip Code
srosen@trianpartners.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:
Stuart I. Rosen at (212) 451-3040
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- \$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee)
- \$1,008.75 Filing Fees and Certificate of Status
- \$1,052.50 Filing Fees and Certified Copy
- \$1,061.25 Filing Fee, Certified Copy, and Certificate of Status

STREET ADDRESS:
Registration Section
Division of Corporations
Clifton Building

MAILING ADDRESS:
Registration Section
Division of Corporations
P. O. Box 6327

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**APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR
LIMITED LIABILITY LIMITED PARTNERSHIP
TO TRANSACT BUSINESS IN FLORIDA**

1. Trian Fund Management, L.P.

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)

Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.

Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix.

2. Delaware

State or Country of Formation

3. September 8, 2005

Date of Formation

4. Federal Employer Identification Number: 20-3454182

5. Name of Registered Agent for Service of Process and Florida Street Address:

Corporation Service Company

1201 Hays Street

Tallahassee, FL 32301

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 TALLAHASSEE, FLORIDA

6. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Corporation Service Company Roxanne Turner
 By: [Signature] Asst. Vice President
 Signature of Registered Agent

7. Principal Office:

280 Park Avenue, 41st Floor

New York, NY 10017

8. Mailing Address:

280 Park Avenue, 41st Floor

New York, NY 10017

9. If limited partnership is a limited liability limited partnership, check box.

10. Name, principal office address, and mailing address of each general partner:

Name of General Partner: Trian Fund Management GP, LLC

Name of General Partner: _____

Street Address: New York, NY 10017

Street Address: _____

New York, NY 10017

Mailing Address: 280 Park Avenue, 41st Floor

Mailing Address: _____

New York, NY 10017

Name of General Partner: _____

Name of General Partner: _____

Street Address: _____

Street Address: _____

Mailing Address: _____

Mailing Address: _____

Name of General Partner: _____ Name of General Partner: _____

Street Address: _____ Street Address: _____

Mailing Address: _____ Mailing Address: _____

11. Effective date, if other than the date of filing: _____
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 2nd day of March, 2020
By: Edward P. Garden
Edward P. Garden, Member
Signature of a general partner

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TALLAHASSEE FLORIDA

The individual signing this document affirms that the facts stated herein are true and the individual is aware that 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.

Filing Fees: \$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional): \$52.50
Certificate of Status (optional): \$8.75

Delaware


The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TRIAN FUND MANAGEMENT, L.P." 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 SECOND DAY OF MARCH, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TRIAN FUND MANAGEMENT, L.P." WAS FORMED ON THE EIGHTH DAY OF SEPTEMBER, A.D. 2005.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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Jeffrey W. Bullock, Secretary of State

4027494 8300

SR# 20201834281

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202494192

Date: 03-02-20