

9/22/23, 2:36 PM

Division of Corporations

**F1900005450**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (954)208-0845  
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23 SEP 22 AM 9:45  
TALLAHASSEE, FLORIDA

**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
AMPLIFY SNACK BRANDS, INC.**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 1       |
| Page Count            | 06      |
| Estimated Charge      | \$43.75 |

J. HORNE

SEP 25 2023

Electronic Filing Menu

Corporate Filing Menu

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DocuSign Envelope ID: 97F8DED1-CF16-4D05-9C3F-32DEEB525BES

**PROFIT CORPORATION**  
**APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR**  
**AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

(Pursuant to s. 607.1504, F.S.)

**SECTION I**  
**(1-3 MUST BE COMPLETED)**

F19000005450

(Document number of corporation (if known))

FILED  
23 SEP 22 AM 9:44  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

1 Amplify Snack Brands, Inc.

(Name of corporation as it appears on the records of the Department of State)

2 Delaware

12-09-2019

(Incorporated under laws of)

(Date authorized to do business in Florida)

**SECTION II**  
**(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)**

4 If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? \_\_\_\_\_

5 The Hershey Salty Snacks Sales Company

(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6 If the amendment changes the period of duration, indicate new period of duration

\_\_\_\_\_  
 (New duration)

7 If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction

\_\_\_\_\_  
 (New jurisdiction)

8. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent \_\_\_\_\_

\_\_\_\_\_  
 (Florida street address)

New Registered Office Address \_\_\_\_\_, Florida

(City)

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

\_\_\_\_\_  
 Signature of New Registered Agent, if changing

see attached for current list of  
directors and officers

see attached for current list of  
directors and officers

| <u>Title/ Capacity</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|------------------------|-------------|----------------|-----------------------|
|                        |             |                | Add                   |
|                        |             |                | Remove                |
|                        |             |                | Add                   |
|                        |             |                | Remove                |
|                        |             |                | Add                   |
|                        |             |                | Remove                |
|                        |             |                | Add                   |
|                        |             |                | Remove                |
|                        |             |                | Add                   |
|                        |             |                | Remove                |

16. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

Lauren Lacey

Signature of a director, president or other officer - (if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Director, Secretary

(Title of person signing)

[illegible]

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## 9. Current Directors and Officers at 19 East Chocolate Avenue, Hershey, PA 17033

| Name                    | Title               |
|-------------------------|---------------------|
| Caponi, Gino            | Director            |
| Lace, Lauren            | Director            |
| Villasenor, Veronica F. | Director            |
| Villasenor, Veronica F. | President           |
| Caponi, Gino            | Vice President      |
| Hutfield, Brock         | Treasurer           |
| Lace, Lauren            | Secretary           |
| Reeves, Michael D.      | Assistant Treasurer |
| Smith, Shanon T.        | Assistant Secretary |
| Stahl, Jocelyn M.       | Assistant Secretary |
| Tomshock, Ryan          | Assistant Treasurer |
| Weng, Lisa F.           | Assistant Secretary |
| Wilson, Angela          | Assistant Secretary |

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "THE HERSHEY SALTY SNACKS SALES COMPANY" 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 NINETEENTH DAY OF SEPTEMBER, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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



5562351 8300

SR# 20233527200

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 in a small font.

Authentication: 204193947

Date: 09-19-23

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY THAT THE SAID "AMPLIFY SNACK BRANDS,  
INC.", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO  
"THE HERSHEY SALTY SNACKS SALES COMPANY" ON THE TWENTY-SIXTH DAY  
OF JULY, A.D. 2023, AT 4:04 O'CLOCK P.M.



5562351 8320  
SR# 20233550323

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: 204216565  
Date: 09-21-23