Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000185170 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (954)208-0845 Fax Number : (614)573-3996

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

lindsay.schwarz@kellogg.com

Email Address:

## FOREIGN PROFIT/NONPROFIT CORPORATION WK KELLOGG CO

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES. THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

l. WK Kellogg C			
(Enter name of a "Inc.," "Co.," "C	corporation; must include "INCORPORATED." "orp," "Inc." "Co." or "Corp.")	"COMPANY," "CORPORATION	l,"
(If name unavai	able in Florida, enter alternate corporate name a	ndopted for the purpose of transacting	g business in Florida)
Delaware	1	92-1243173	
LUGAZONOS	ry under the law of which it is incorporated)	(FEI number, if app	
(Date	e of incorporation) 5.	(Date of duration, if other th	nan perpetual)
· <u></u>	are. Battle Creek, MI 49017  (Principal officiare, North Tower, Battle Creek, MI 49016-359)	re <u>street</u> address)	<del></del>
A BARBO &		g address, if different)	
. Name and <u>stree</u> Name:	et address of Florida registered agent: (P.O. C T Corporation System	Box NOT acceptable)	2023 HAY 19
Mice Address:	1200 South Pine Island Road		·
	Plantation	FL 33324	7. TO
	(City)	(Zip code)	. بسر د برا می بسر
			(

## 9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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.

Ву:	C.T Corporation System	Kaity Toon, Asst. Secretary
	(Registered agent's signature)	

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

A. DIRECTORS					
☐Chairman Name:Gary Pilnick	□Chairman	Name:			
□ Vice Chairman Address: One Kellogg Square	□ Vice Chairman	Address:			
■Director Battle Creek, MI 49017	■Director	Battle Creek, MI 49017			
■ President					
□Vice President	■ Vice President				
TiSecretary Tireasurer	■Secretary	□Treasurer			
□Other □Other	]Other				
☐ Chairman  Name:    Joel VanderKooi	☐ Chairman ☐ Vice Chairman ☐ Director	One Kellogg Square Address: Battle Creek, MI 49017			
□ President	□President				
■ Vice President	TVice President				
☐ Secretary ☐ Treasurer ☐ Other ☐ ☐ Other ☐	□ Secretary  ■Other Assistant	□ Treasurer  Secretar □ Other			
□ Chairman Name:  □ Vice Chairman Address: One Kellogg Square □ Director Battle Creek, MI 49017	UChairman □Vice Chairman □Director	Name: Norma Barnes-Euresti  One Kellogg Square  Address: Baule Creek, MI 49017			
CIPresident		<u></u>			
☑ Vice President	□ Vice President	· · · · · · · · · · · · · · · · · · ·			
☐Secretary ☐Treasurer ☐Other ☐Other ☐Other ☐	Secretary  Assistant	□Treasurer Secretar			
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.  Signature of Director or Officer  The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she 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.  Gordon Paulson, Assistant Secretary  5/15/2023					

(Typed or printed name and capacity of person signing application)



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "WK KELLOGG CO" 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 EIGHTEENTH DAY OF MAY, 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.



Jeffrey W. Ruffoca, Secretary of State

7154474 8300 Authentication: 203376695