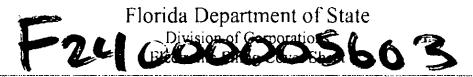
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Division of Corporations



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (614)573-3996

\*\*Enter the email address for this business entity to be used for future 

Email Address: ANGELA.RAITI@PEPSICO.COM

## FOREIGN PROFIT/NONPROFIT CORPORATION PEPSI- COLA TECHNICAL OPERATIONS, INC.

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## 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.

(Enter name of corporation: must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp." "Inc.," "Co.," or "Corp.")  (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida,  DE 3, 45-0484112  (State or country under the law of which it is incorporated) (PEI number, if applicable)  07/15/2002 5,  (Date of incorporation) (Date of duration, if other than perpetual)  (Pare first transacted business in Florida, if prior to registration)  (SEE SECTIONS 607,1501 & 607,1502, F.S., to determine penalty liability)  700 Anderson Hill Road, Purchase, NY 10577  (Principal office street address)  (Current mailing address, if different)  Name: C T Corporation System  Office Address: 1200 South Pine Island Road  Plantation FL 33324	
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida  DE:  3. 45-0484112  (State or country under the law of which it is incorporated) (FEI number, if applicable)  07/15/2002  5. (Date of incorporation) (Date of duration, if other than perpetual)  (Date of incorporation) (SEE SECTIONS 607,1501 & 607,1502, F.S., to determine penalty liability)  700 Anderson Hill Road, Purchase, NY 10577  (Principal office street address)  (Current mailing address, if different)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:  C T Corporation System  C T Corporation System  FL 33324	
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Plantation FL 33324	
Plantation FL 33324	۽
- <del></del> ,	<u>.</u>
(City) (Zip code)	
Duristand agent's togetheres	
Registered agent's acceptance: aving been named as registered agent and to accept service of process for the above stated corporation afth	e nlac
signated in this application, I hereby accept the appointment as registered agent and agree to act in this cap	
rther agree to comply with the provisions of all statutes relative to the proper and complete performance of a	my di
id I am familiar with and accept the obligations of my position as registered agent.	
C.T. Corporation System	
By: Stephen Rullis Stephen Rullis, Assistant Secretary	

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.

11. For initial indexing purposes, fist names, titles and addresses of the primary officers and or directors [up to six (6) total].

(Registered agent's signature)

A. DIRECTORS			
□ Chairman	Name: Mary Ann Wynne	□ Chairman	Name: Megan Hurley
□ Vice Chairman	Address: 700 Anderson Hill Road.	□Vice Chairman	Address: 700 Anderson Hill Road
□ Director	Purchase, NY 10577	□Director	Purchase, NY 10577
□President		President	
☑Vice President	- MATALON C	□Vice President	
☐ Secretary	☐Treasurer	☐Secretary	©Treasurer
□Other	Other	□Other	€Other
	Mary Arm Wirms		A Course Monday
□ Chairman	Name: Mary Ann Wynne	□Chairman	Name: Megan Hurley
□Vice Chairman	Address: 700 Anderson Hill Road	□ Vice Chairman	Address:
@Director	Purchase, NY 10577	<b>⊡</b> Director	Purchase, NY 10577
□Presiden		□President	
□Vice President		□Vice President	
□ Secretary	□ 1 reasurer	☐ Secretary	□Treusmer
□Other	Other	□Other	□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
<b>57</b> . W. J.			
□Chairman	Name:	□Chairman	Name:
□Vice Chairman	Address:	☐Vice Chairman	Address:
□Director _		Director	
El President		□President	
□Vice President _		□ Vice President	
□Secretary	□Treasurer	□ Secretary	□ Freasurer
□Other	Other	Other	□Other □
individuals may be a	se an attachment to report more than six (6). The dded to the index when tiling your Florida Dep   And Mystal  Stenature of Directions	artment of State Annual Rep	ort form.
- I went	Signature of Dire	ctor or Officer	
she is aware that fals 5.817.155, F.S.	or signing this document (and who is listed in no e information submitted in a document to the D one - Vice President	umber 1) above) affirms that repartment of State constitute	t the facts stated herein are true and that he or is a third degree felony as provided for in
13.	nne - Vice President		

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

## Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "PEPSI-COLA TECHNICAL OPERATIONS, INC."

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 TWENTY-FOURTH DAY OF

OCTOBER, A.D. 2024.

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.

at corp.delaware.gov/auth

Authentication: 204710673

Date: 10-24-24

To: