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| (Requestor's Name) |
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| (Address) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer. |
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(850) 656- 4724 3458 lakesore Drive Tallahassee, FL 32312

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| | | Acc#I20160000072 | 4. C > V |
| Name: | The Gatora | ade Company | |
| Document #: | | | |
| Order #: | 15946043 | | |
| Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of | | | |
| Apostille/Notarial Certification: | | Country of Destination: Number of Certs: | |
| Filing: 🗸 | Certified Plain: COGS: | 1: 🗸 | Email Address for Annual Report Notifications: |
| Availability Document Examiner Updater Verifier W.P. Verifier Ref# | Amount | :\$ 78.75 | |

Thank you!

COVER LETTER

| TO: | | ration Section on of Corporations | | | | |
|--|-------------------------------------|--|-----------------|--|--|--|
| SUBJ | ECT: | The Gatorade Company | | | <u> </u> | |
| | • | | oration - must | include suffix | | |
| Dear S | ir or Ma | dam: | | | | |
| "Certif | icate of | Application by Foreign Corporati Existence," or "Certificate of Goo ed foreign corporation to transact | od Standing" a | nd check are subn | t Business in Florida," nitted to register the | |
| Please | return a | H correspondence concerning this | matter to the | following: | | |
| Ang | gela Rait | i Na | ime of Person | | | |
| Pep | siCo, Ir | | | | | |
| | | Fin | m/Company | | | |
| 700 | Anders | on Hill Road | Address | | | |
| Pur | chase, ì | NY 10577 City/ | State and Zip | code | | |
| ang | gela.rait | i@pepsico.com E-mail address: (to be | used for futu | re annual report no | otification) | |
| For fu | rther inf | ormation concerning this matter, p | olease call: | | | |
| A1 | nge la_ Ra Name | of Person Are | 914) ea Code | 253-2251 Daytime Teleph | none Number | |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 | | | | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | |
| Please | sed is a c make che) 00 Fili | heck for the following amount: tek payable to: FLORIDA DEPART ng Fee | & 🗆 S78.7 | ATE '5 Filing Fee & fied Copy | ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy | |

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.

| (It name unavaila | ble in Florida, enter alternate corporate name a | dopted for th | e purpose of transactir | ng business in Florida) | |
|-------------------------------|--|-----------------|---------------------------|-------------------------|--------|
| 2. <u>Delaware</u> | y under the law of which it is incorporated) | 36-37198 | S67 (FEI number, if ap | . t' l. l - s | - |
| (State or country | under the law of which it is incorporated) | | (FEI number, if ap | эрисавіе) | |
| 4. <u>07/19/1990</u> (Date | of incorporation) 5. | (Da | te of duration, if other | than perpetual) | - |
| 7 <u>700 Ander</u> | (Date first transacted business in (SEE SECTIONS 607.1501 & 607.15 son Hill Road, Purchase, NY 10577 (Principal offic | 02. F.S., to do | etermine penalty liabil | | - |
| 8. Name and stree | (Current mailing t address of Florida registered agent: (P.O C T Corporation System | - | | 2824 NOV -1 1 | APPROV |
| Office Address: | 1200 South Pine Island Road | - - | | | ר כ |
| | Plantation | FL | 33324 | 25 | |
| | (City) | · | (Zip code) | • | |

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, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

C T Corporation System

| A. DIRECTORS | | | |
|-----------------|--|----------------------------------|---|
| Chairman | Name: | □Chai⊓nan | Name: Lennaert Ten-Cate |
| □Vice Chairman | Address: 700 Anderson Hill Rd. Purchase, NY 10577 | □Vice Chairman | Address: 700 Anderson Hill Rd. Parchase, NY 10577 |
| □Director | | Director | |
| □President | | President | |
| ™Vice President | | 🖾 Vice President | |
| Secretary | □Treasurer | Secretary | Treasurer |
| Other | □Other | Other | Other |
| □ Chairman | David Mariano | ⊡Chairman | Name: Cynthia Nastanski |
| □Vice Chairman | | □Vice Chairman | Address: 700 Anderson Hill Rd, Purchase, NY 1057 |
| ☐Director | | ☐ Director | |
| □President | | President | |
| ☐Vice President | | □ Vice President | |
| Secretary | ☐'Freasurer | Secretary | ☐ Treasurer |
| □ Other | □Other | □Other | O(her |
| □ Chairman | Name: | □Chairman | Name: |
| □Vice Chairman | Address: | □ Vice Chairman | Address: |
| Director | | □Director | |
| □President | | □President | |
| □Vice President | | □Vice President | |
| ☐ Secretary | ☐Treasurer | Secretary | Treasurer |
| Other | Other | Other | Other |
| 12. Many be | Use an attachment to report more than six (6). The attachment to the index when filing your Florida Department of Director of Signature of Director of Country of the Signature of Director of | ent of State Annual Root Officer | hat the facts stated herein are true and that he or |
| 13. <u>Mary</u> | Ann Wynne - Vice President | | |
| | (Typed or printed name and capacity of pers | on signing application | 9 |

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "THE GATORADE 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 TWENTY-NINTH 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.

Authentication: 204749252

Date: 10-29-24

2236485 8300 SR# 20244074451