

F97000003964

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 : (850) 222-1092  
Fax Number : (850) 878-5368

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

Email Address: \_\_\_\_\_

10 MAR 10 AM 8:21

FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

**REGISTERED AGENT CHANGE  
NEW BERN TRANSPORT CORPORATION**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

RA/RO/chs  
@ 3/11/10

RECEIVED  
2010 MAR 10 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: NEW BERN TRANSPORT CORPORATION  
Name of Corporation

DOCUMENT NUMBER: F97000003964

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Nora Ryan

Name of Contact Person

PepsiAmericas, Inc.

Firm/Company

1475 East Woodfield Road, Suite 1300

Address

Schaumburg, IL 60173

City/State and Zip Code

nora.ryan@pepsico.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nora Ryan

at

847

394-7266

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address:  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

CR2E045 (8/05)

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS**

*Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Delaware in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: NEW BERN TRANSPORT CORPORATION
2. The principal office address: 9100 MERIDIAN SQUARE, 50 EAST 91ST STREET, SUITE 305A  
INDIANAPOLIS, IN 46240
3. The mailing address (if different): 1 PEPSI WAY, SOMERS, NY 10589

4. Date of incorporation/qualification: 07/29/1997 Document number: F97000003964

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

NRAI SERVICES, INC.

2731 EXECUTIVE PARK DRIVE, SUITE 4

WESTON, FL 33331

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

C T Corporation System

c/o C T Corporation System, 1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, Florida 33324

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

*Sandra Gilliss*  
Signature of an officer or director

Sandra Gilliss, Vice President

Printed or typed name and title

*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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

By: *Rebecca Barth*  
Signature of Registered Agent

3-8-2010

Date

If signing on behalf of an entity:

Assistant Secretary  
Rebecca Barth

Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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STATE  
TALLAHASSEE, FL 32314  
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