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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: C T CORPORATION SYSTEM Account Name

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. **

Foreign Limited Liability Company Heinz GP LLC

Certificate of Status	0
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5/21/2012

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CT CORPORATION

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COVER LETTER

	Registration Section Division of Corporations				
SUBJEC	T: Heinz GP LLC		•		
		Name of Limited Liability Company			
The enclo	osed "Application by Foreign Limited c, and check are submitted to register the	Liability Company for Authorization to Transact Business in Flore above referenced foreign limited liability company to transac	orida," Cer g business i	tificate in Floric	of Ja
Please ret	turn all correspondence concerning thi	s matter to the following:			
					
		Name of Person			
	CT Corporation				
		Firm/Company	A	12	
	1200 South Pine Island Road	•	- A A	T.	
		Address	ASS	72	
	Plantation, Florida 33324			<u> </u>	
		City/State and Zip Code			
	Regis.Flowers@us.hjheinz.con	,	SEA	Ω Ö	
	E-mail addres	s: (to be used for future annual report notification)	>	€O	
For furthe	er information concerning this matter, p	please.call:			
s	harron Simonetti	at (412) 456-1790			
	Name of Person	Area Code & Daysime Telephone Number			
E R P	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Callahassec, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
Enclosed ⊠S	is a check for the following am 125.00 Filing Fee S130.00 Filing Certificate of	Fee & S155.00 Filing Fee & S160.00 Filing Fee, Cer			

PLOST - 10/05/2019 C T System Ordine

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Heinz GP LLC	·				
(Name of Foreign Limited Liability Co	mpany; must include "Limit	ed Liability Company," "LL.C	.," or "LLC.")		
(If name unavailable, enter alternate name ado consent of the managers or managing members Company," "L.L.C," "L.L.C.")					n
2. Delaware	3.				
(Jurisdiction under the law of which foreign company is organized)	limited liability	(FEI number, if applicat	ble)		
4. 04/23/2009	5. Perpetu	اهر اهر			
(Date of Organization)		tion: Year limited liability.com or "perpetual")	pany will cease	a to	
6.					
	ted business in Florids, if pr 01 & 608.502 F.S. to determ				
7. 357 Sixth Avenue					
Pittsburgh, PA 15222			A.C.	~ 73	
	(Street Address of Princip	al Office)	£m	7	-
8. If limited liability company is a mar	jager-managed compan	y, check here 🔲	ASSE	2	-
9. The name and usual business address	, ,	embers or managers are as	follows S	3	T
11. I. Leinz Corry	Energy hang		77 S		フ
11. S. Leine Congs			TE TDA	<u> </u>	

10. Attached is an original certificate of existence the jurisdiction under the law of which it is organ translation of the certificate under oath of the tran	ized. (A photocopy is not acc				n
11. Nature of business or purposes to b	se conducted or promote	ed in Florida: Holding Comp	рвпу		
-	24,000/			 ,	
		representative of a member			
(in accordance with section 608,41 penalties of perjury that the facts document to the Department of Leonard A. Cuillo, J	stated herein are true. I am aw of State constitutes a third de	s document constitutes an affirmativate that any false information a gree felony as provided for in s	submitted in a)	
T	yped or printed name of	Signee	_		

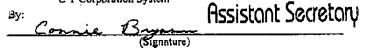
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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of	of the Limited Liabilit	y Company is:			
Heinz GP LLC	,				
If unavailable,	, the alternate to be us	ed in the state of Florida is:			
2. The name a	and the Florida street a	address of the registered agent and office are:	A		
	C T Corporation System	1	SECA	12	
	•	(Name)	HAS	2 / Fill	Ţ
	1200 South Pine Island	Road	TARY OF ASSEE.	= 1	
	Florida S	treet Address (P.O. Box NOT ACCEPTABLE)	OF S		LI.
	Plantation	FL 33324	F STATE FLORIDA	ν Se C	قسد.
		City/State/Zip	, , , , , , , , , , , , , , , , , , ,	9	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided to the property of the CT Corporation System



\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

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Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HEINZ GP LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINTH DAY OF MAY, A.D. 2012.

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

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You may verify this cartificate caline at corp. delaware.gov/authver.shtml

AUTHENTY CATION: 9560460

DATE: 05-09-12

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