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M. MILLIGAN
JUL 25 2017

#### CT CORP

#### 3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

850-508-1891 (cell)

Date:	7/2417 ACCT. 120160000072	W.
Name:	Kraft Heinz Fools Wom Pany	
Document #:		
Order #:	10 549679	
Certified Copy of Arts & Amend: Plain Copy:		
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#### COVER LETTER

то:	Registration Section Division of Corporation	าร		
SHRI	Kraft Heinz Foods	Company (LLC)		
00130		Name of I	Limited Liability Company	
The ex	nclosed "Application by For ence, and check are submitte	reign Limited Liability Comp d to register the above refere	nany for Authorization to Trenced foreign limited liabili	ransact Business in Florida," Certificate of ty company to transact business in Florida
Please	e return all correspondence of			
		CT to file		
		Name of Limited Liability Company  ign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of to register the above referenced foreign limited liability company to transact business in Florida  necerning this matter to the following:  CT to file  Name of Person  Address  City/State and Zip Code  aftheinz.com  E-mail address: (to be used for future annual report notification)		
		Fi	rm/Company	
			Address	
		City/S	tate and Zip Code	
	Regis.Flowers@	krastheinz.com		
	<del>_</del>	E-mail address: (to be used	for future annual report no	otification)
For fi	urther information concerning	ng this matter, please call:		
	CT to file		at () Area Code Da	
	Name of	of Contact Person	Area Code Da	ytime Telephone Number
	MAILING ADDRESS: Division of Corporation		Division	T ADDRESS: of Corporations
	Registration Section P.O. Box 6327		_	ntion Section Building
	Tallahassee, FL 32314		2661 Ex	secutive Center Circle see, FL 32301
Enclo	osed is a check for the follow		Detce on PRO-P 9-	□ \$160.00 Filing Fee, Certificate
	☐ \$125.00 Filing Fec	☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy	of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

liability Company," "L.L.C,	Iternate name adopted for the purpos " or "LLC.")	se of transacting busine	ss in Florida. The alternate name	must include "Limited
2 Pennsylvania		3. 25-0542520		
(Jurisdiction under the law company is organized)	of which foreign limited liability		(FEI number, if applicable)	<u> </u>
1. 7/1/2017				<b>1</b> 1
	(Date first transacted busine (See sections 605.0904 & 605	ess in Florida, if prior t 5.0905, F.S. to determin	o registration.) ne penalty liability)	
one PPG Place, Pittsbi	argh, PA 15222			24
-				=
	(Street Address of	Principal Office)		17 JUL 24 AH 9: 42
Same				£2
				. •
	(Mailing	Address)		
7. Name and street address	ss of Florida registered agent: (P	O. Box NOT accep	rtable)	
Name:	C T Corporation System		_	
Office Address:	1200 South Pine Island Road			
Office Address.				
	Plantation (City)		, Florida <u>33324</u> (Zip code)	
Registered agent's accep	itance: egistered agent and to accept ser	ruine of process for t	ba ahova statad limitad liahilit	v company at the plac
Taving been namea as re Inclanated in this applica	tion, I hereby accept the appoin	utment as registered a	agent and agree to act in this :	capacity. I further ag
iesignaieu in inis appiica			le performance of my duties, a James M. Halpin	ınd I am familiar wili
o complywith the provisi	mv position as registered agent.			
o complywith the provisi	1 h. OIN CTO	Corporation System	Accietant Secretary	
o complywith the provisi	1 h. OIN CTO		Accietant Secretary	
o complywith the provisi accept the obligations of	By Jan M Hoj CTC	Corporation System stered agent's signature	Assistant Secretary	
o complywith the provisincept the obligations of the obligations of 8. The name, title or cap	By. a. M. H. CTC (Regis	Corporation System stered agent's signature s) who has/have author	Assistant Secretary  ority to manage is/are:	
to complywith the provising complywith the provising comply the obligations of the control of th	By Jan M Hoj CTC	Corporation System stered agent's signature s) who has/have author	Assistant Secretary  ority to manage is/are:	·
to complywith the provising complywith the provising comply the obligations of the control of th	By. a. M. H. CTC (Regis	Corporation System stered agent's signature s) who has/have author	Assistant Secretary  ority to manage is/are:	
to complywith the provising complywith the provising comply the obligations of the control of th	By. a. M. H. CTC (Regis	Corporation System stered agent's signature s) who has/have author	Assistant Secretary  ority to manage is/are:	
to complywith the provision complywith the provision of accept the obligations of a certificate that the complex is a certificate of the complex in the comp	By. A M CTC (Regis acity and address of the person(s Corporation II, One PPG Place,	Corporation System stered agent's signature s) who has/have author, Pittsburgh, PA 1522	Assistant Secretary  ority to manage is/are:  Member  icated by the official having cu	stody of records in the
to complywith the provision complywith the provision complywith the provision of a certificate function and a certificate furisdiction under the law	By. A M CTC (Regis acity and address of the person(s) Corporation II, One PPG Place, e of existence, no more than 90 de of which it is organized. (If the	Corporation System stered agent's signature s) who has/have author, Pittsburgh, PA 1522	Assistant Secretary  ority to manage is/are:  Member  icated by the official having cu	istody of records in the
to complywith the provision complywith the provision of accept the obligations of a certificate that the complex is a certificate of the complex in the comp	By. A M CTC (Regis acity and address of the person(s) Corporation II, One PPG Place, e of existence, no more than 90 de of which it is organized. (If the	Corporation System stered agent's signature s) who has/have author, Pittsburgh, PA 1522	Assistant Secretary  ority to manage is/are:  Member  icated by the official having cu	stody of records in the

Typed or printed name of signee

Nichol McCroy, Vice President of Kraft Heinz Intermediate Corporation II, Member

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.

## COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE 07/03/2017



#### TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

Kraft Heinz Foods Company

is duly registered as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

Secretary of the Commonwealth

Certification Number: TSC170703120787-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify.aspx