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(Requestor's Name)

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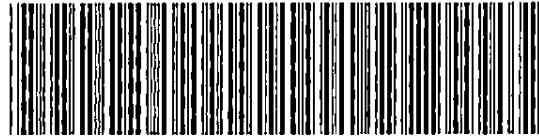(City/State/Zip/Phone #)

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_____
(Business Entity Name)

_____
(Document Number)

Certified Copies _____   Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

19 JAN -2 PM 3: 31

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CORPORATE ACCESS, INC.

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☐	CERTIFIED COPY	_____
XX	PHOTOCOPY	_____
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XX	FILING	FOREIGN

1. **UTZ QUALITY FOODS, LLC**
  (CORPORATE NAME AND DOCUMENT #)

2. _____
  (CORPORATE NAME AND DOCUMENT #)

3. _____
  (CORPORATE NAME AND DOCUMENT #)

4. _____
  (CORPORATE NAME AND DOCUMENT #)

5. _____
  (CORPORATE NAME AND DOCUMENT #)

6. _____
  (CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS: _____

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 COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. UTZ QUALITY FOODS, LLC

    (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C." or "L.L.C.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.")

2. Delaware

    (Jurisdiction under the law of which foreign limited liability company is organized)

3. 23-1292435

    (FEI number, if applicable)

4. _____

    (Date first transacted business in Florida, if prior to registration.)
    (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 900 High Street

    (Street Address of Principal Office)

Hanover, PA 17331 USA

6. 900 High Street

    (Mailing Address)

Hanover, PA 17331 USA

7. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)

Name: Registered Agent Solutions, Inc.

Office Address: 155 Office Plaza Dr., Suite A

Tallahassee , Florida 32301
    (City)   (Zip code)

FILED 2019 ___ -2 ___ 7:__ SECRE___ TALLAHASSEE, FLORIDA ___ STATE

Registered agent's acceptance:
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 application, 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 obligations of my position as registered agent.

Adam Saldana, Ass't Sec.

    (Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity: **Name and Address:**

Manager & Member   Dylan B. Lissette
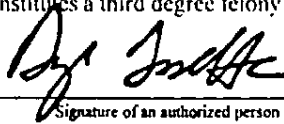
_____   _____

                                     900 High Street

                                     _____

                                     Hanover, PA 17331 USA

                                     _____

(Use attachments if necessary)

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. 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.

_____
Signature of an authorized person

Dylan B. Lissette
_____
Typed or printed name of signee

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "UTZ QUALITY FOODS, 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 SECOND DAY OF JANUARY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "UTZ QUALITY FOODS, LLC" WAS FORMED ON THE EIGHTEENTH DAY OF SEPTEMBER, A.D. 2016.

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

Jeffrey W. Bullock, Secretary of State

6153363 8300

SR# 20190013767

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202004103

Date: 01-02-19