## State of Indiana Office of the Secretary of State

## **Certified Copies**

To Whom These Presents Come, Greeting:

I, DIEGO MORALES, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that this is a true and complete copy of this 3 page document consisting of the following records filed in this office:

Certification Date: Business Name: Business ID: November 19, 2024 FLAVOR BURST, LLC 202301301659039

Transaction	Date Filed	No. of pages
Business Entity Report	11/06/2024	3
	Total No. of pages	3



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, November 19, 2024

iego Morales

DIEGO MORALES SECRETARY OF STATE

202301301659039 / 17208092

All certificates should be validated here: https://bsd.sos.in.gov/ValidateCertificate Expires on December 19, 2024.

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# APPROVED AND FILED DIEGO MORALES INDIANA SECRETARY OF STATE 11/06/2024 09:44 AM

#### **BUSINESS ENTITY REPORT**

#### NAME AND PRINCIPAL OFFICE ADDRESS

**BUSINESS ID** 202301301659039

BUSINESS TYPE Foreign Limited Liability Company

BUSINESS NAME FLAVOR BURST, LLC

ENTITY CREATION DATE 01/30/2023

JURISDICTION OF FORMATION Delaware

**PRINCIPAL OFFICE ADDRESS** 499 Commerce Drive, Danville, IN, 46122, USA

YEARS FILED

**YEARS** 2025/2026

EFFECTIVE DATE

**EFFECTIVE DATE** 11/06/2024 **EFFECTIVE TIME** 9:44 AM

#### REGISTERED OFFICE AND ADDRESS

REGISTERED AGENT TYPE

Business Commercial Registered Agent

NAME

C T CORPORATION SYSTEM

ADDRESS 334 North Senate Avenue, Indianapolis, IN, 46204, USA

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### APPROVED AND FILED

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#### **GOVERNING PERSON INFORMATION**

TITLE Chief Executive Officer and President

**NAME** Timothy J. Fitzgerald

ADDRESS 499 Commerce Dr, Danville, IN, 46122, USA

TITLE Chief Financial Officer

NAME Bryan E. Mittelman

ADDRESS 499 COMMERCE DR, Danville, IN, 46122, USA

TITLE Assistant Secretary

NAME Michael D. Thompson

ADDRESS 499 COMMERCE DR, Danville, IN, 46122, USA

TITLE Associate General Counsel
NAME Michael D. Thompson

ADDRESS 499 COMMERCE DR, Danville, IN, 46122, USA

TITLE Vice President

NAME Brittany C. Cerwin

ADDRESS 499 COMMERCE DR, Danville, IN, 46122, USA

**TITLE** Vice President

NAME Michael D. Thompson

ADDRESS 499 COMMERCE DR, Danville, IN, 46122, USA

TITLE Vice President

NAME Matthew R. Fuchsen

ADDRESS 499 COMMERCE DR, Danville, IN, 46122, USA

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#### APPROVED AND FILED

DIEGO MORALES INDIANA SECRETARY OF STATE 11/06/2024 09:44 AM

#### **SIGNATURE**

IN WITNESS WHEREOF, THE UNDERSIGNED HEREBY VERIFIES, SUBJECT TO THE PENALTIES OF PERJURY, THAT THE STATEMENTS CONTAINED HEREIN ARE TRUE, THIS DAY November 6, 2024.

THE UNDERSIGNED ACKNOWLEDGES THAT A PERSON COMMITS A CLASS A MISDEMEANOR BY SIGNING A DOCUMENT THAT THE PERSON KNOWS IS FALSE IN A MATERIAL RESPECT WITH THE INTENT THAT THE DOCUMENT BE DELIVERED TO THE SECRETARY OF STATE FOR FILING.

SIGNATURE Melanie Robinson
TITLE Authorized Agent

Business ID: 202301301659039

Filing No.: 10562412

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