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SECRETARY OF STATE ONS SECRETARY OF CORPORATIONS

Poyner Spruill^{up}

Netl L. Summerlin, NCCP Paralegal D: 252.972.7065 F: 252.972.7045

F: 252.972.7045 nsummerlin@poynerspruill.c

March 1, 2012

VIA FEDERAL EXPRESS

Corporations Division
Florida Secretary of State
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee FL 32301

Re:

Coastal Treated Products LLC

Dear Sir:

Enclosed for filing is an original and one copy of an Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida for Coastal Treated Products LLC. We have enclosed our check in the amount of \$155.00 for the filing and certified copy fee.

Also enclosed is a check in the amount of \$777.50 representing the annual fees of \$138.75 per year for two years(\$277.50 total annual fees) and a \$500.00 penalty fee.

Please file this document as soon as possible and return the certified copy to me in the enclosed envelope. Thank you for your assistance in this matter.

Sincerely yours

Nell L. Summerlin, NCCP

Paralegal

Enclosure

SOUTHERN PINES

COVER LETTER

то:	Registration Section
	Division of Corporations

SUBJECT: COASTAL TREATED PRODUCTS LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

	Name of Person LP Firm/Company
POYNER SPRUILL LI	LP
,	Firm/Company
P O BOX 353	
	Address
ROCKY MOUNT NC	27802-0353
	City/State and Zip Code
bherring@poyners	ess: (to be used for future annual report notification)
E-mail addre	ess: (to be used for future annual report notification)
	1 11
urther information concerning this matter,	, please call:
urther information concerning this matter, Nell Summerlin	, please call:at (252) 972-7065
-	
Nell Summerlin Name of Person MAILING ADDRESS:	at (252) 972-7065 Area Code & Daytime Telephone Number STREET ADDRESS:
Nell Summerlin Name of Person MAILING ADDRESS: Division of Corporations	at (252) 972-7065 Area Code & Daytime Telephone Number STREET ADDRESS: Division of Corporations
Nell Summerlin Name of Person MAILING ADDRESS:	at (252) 972-7065 Area Code & Daytime Telephone Number STREET ADDRESS: Division of Corporations Registration Section Clifton Building
Nell Summerlin Name of Person MAILING ADDRESS: Division of Corporations Registration Section	at (252) 972-7065 Area Code & Daytime Telephone Number STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle
Nell Summerlin Name of Person MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327	at (252) 972-7065 Area Code & Daytime Telephone Number STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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:

COASTAL TREATED PRODUCTS LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LL") (Name of Foreign Limited Liability Company) (Name of Foreign Limited Liability Company)	.C.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a consent of the managers or managing members adopting the alternate name. The alternate name must include "Lim Company," "L.L.C," "LLC.")	opy of the written ited Liability
2. NORTH CAROLINA (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)	
company is organized) 4. AUGUST 29, 2008 (Date of Organization) 5. PERPETUAL (Duration: Year limited liability company will	INVESTORE TO A SECOND
exist or "perpetual") 6. 02/01/2010	Property of the control of the contr
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	STATE OR ATTE
7 8007 Florida-Georgia Highway, Havana FL 32333	<u>5</u>
(Street Address of Principal Office)	
 If limited liability company is a manager-managed company, check here The name and usual business addresses of the managing members or managers are as follows 	
Coastal Plywood Company, Member/Manager	·
P O Box 849, Weldon NC 27890	
1433 Georgia Ave., Roanoke Rapids NC 27870	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having cust the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language translation of the certificate under oath of the translator must be submitted.)	
11. Nature of business or purposes to be conducted or promoted in Florida:	
Forest Products Manufacturing	
- Proflessi	
Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the	h.s

(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

Bradley J. Herring, Attorney

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.

The name of the Limited Liability	Company is:	
COASTAL TREATED PR	ODUCTS LLC	,
It unavailable, the alternate to be used	in the state of Florida is:	
2. The name and the Florida street add	dress of the registered agent and office are:	
CT CORPORATION	N SYSTEM (Name)	-
1200 South Pine Florida Stree	Island Road et Address (P.O. Box NOT ACCEPTABLE)	-
Plantation	FL 33324 City/State/Zip	.
	City/State/Zip	

Having been named as registered agent and to accept service of process for the above stated limited hability 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 for in Chapter 608, Florida Statutes.

Michael Seraphin Asst. Secretary
(Signature)

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



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

COASTAL TREATED PRODUCTS LLC

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 29th day of August, 2008, with its period of duration being Perpetual.

I FURTHER certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 21st day of February, 2012.

Elaine J. Marshall

Secretary of State