## 2200000183

(Requestor's Name)
(Address)
(Address)
(Addiedd)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special testructions to Films Officer
Special Instructions to Filing Officer.





600395030696

2022 SEP 26 AM II: 33

2022 SEP 26 1/1 9: 00

9/27/2022

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE : 931839 8303832
AUTHORIZATION: Spelle of man
COST LIMIT : \$ 25.00
ORDER DATE: September 8, 2022
ORDER TIME : 9:19 AM
ORDER NO. : 931839-015
CUSTOMER NO: 8303832
FOREIGN FILINGS
NAME: VERSO PAPER HOLDING LLC
CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY
XXXX AMENDMENT
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Eyliena Baker EXT#

EXAMINER:

## **COVER LETTER**

то:	_		Section Corporations					
SUBJI	ECT:	Verso	Paper Holding LLC					
			Name of Forei	ign Li	mited L	iability Co	mpany	
Dear S	ir or N	4adam:						
The en	closed	applic	ation, certificate and fee(s	s) are	submitte	ed for filing	g.	
Please	return	all cor	respondence concerning th	his m	atter to t	he followi	ng:	
Kevin I	Kuznic	ki				_		
			Name of Person			<del></del>		
Billerud	d U.S.	Produc	tion Holding LLC					
			Firm/Company			<del></del>		
8540 G	Sander	Creek	Drive					
			Address			<del></del>		
Miamis	sburg,	OH 453	42					
	. <u>-</u>		City/State and Zip Coo	de	,			
kevin.k	kuznick	i@bille	rud.com					
E-m	ail adc	lress: (1	o be used for future annua	al rep	ort notif	ication)		
For fur	ther in	ıformat	ion concerning this matter	r, plea	ise call:			
Adam			ū	at (	937	528-3	636	
	-	Narr	e of Person	<b>-</b> `	Area Co	ode & Day	time Telep	hone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314					Division The Co 2415 N	ration Sec on of Corp entre of Ta	oorations illahassee Street, Suite 810	
_			a check for the following				_	
<b>■</b> \$25	Filing	Fee	☐ \$30 Filing Fee & Certificate of Status		\$55 Filii Certified	ng Fee & d Copy	Cer	Filing Fee, tificate of Status & Certified Copy

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

2022 SEP 26 7.X; 9: 00

1. Name of limited liability Company as it appears	on the records of the Flor	ida Department of
State: Verso Paper Holding LLC		
Enter new principal office address, if applicable: _		
( <u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u> )		
Enter new mailing address, if applicable:  (Mailing address  MAY BE A POST OFFICE BOX)		
2. The Florida document number of this limited liab	ility company is: M2200	0000783
3. Jurisdiction of its organization: Delaware		
4. Date authorized to do business in Florida: 01/14	/2022	<del></del>
SECTION II (5-9 complete only the applicable ch	nanges)	
5. New name of the limited liability company: Bille (must c	erud U.S. Production Ho contain "Limited Liability	Company, " "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for copy of the written consent of the managers or manamust contain "Limited Liability Company," "L.L.C.	iging members adopting t	ing business in Florida and attach a he alternate name. The alternate name
6. If amending the registered agent and/or registered registered agent and/or the new registered office add	officer address on our re lress here:	cords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Fl	orida Street Address
		Florida Zip Code
	City	Zip Code
New Registered Agent's Signature, if changing Regit I hereby accept the appointment as registered agent the provisions of all statutes relative to the proper as and accept the obligations of my position as register document is being filed to merely reflect a change in liability company has been notified in writing of this	and agree to act in this c nd complete performance red agent as provided for the registered office add	of my duties, and I am familiar with in Chapter 605, F.S. Or, if this

3. If the amendment changes person, title or capacity in accordance with 605,0902 (1)(e), indicate that change:								
Title/ Capacity	<u>Name</u>	Address	Type of Action					
			□Add					
			□Remov					
	<u> </u>		□Add					
			□Remov					
	·		□Add					
			□Remov					
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					
			□Remov					
		<del></del>	□Add					
aforementioned am	he law of which this entity is or $ u$	by the official having custody of records in the	□Remov					

Filing Fee: \$25.00

Page 1

## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID "VERSO PAPER HOLDING

LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO

"BILLERUD US. PRODUCTION HOLDING LLC" ON THE THIRTIETH DAY OF

JUNE, A.D. 2022, AT 10:05 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF
THE AFORESAID CERTIFICATE OF AMENDMENT IS THE FIRST DAY OF JULY,
A.D. 2022 AT 12:01 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED
LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF
DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT
HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS
OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.



Authentication: 204368078

Date: 09-12-22

3918521 8320 SR# 20223498664