

**2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90093 036 *****50.00

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DOCUMENT # M99000000986

1. Entity Name

REID PLASTICS GROUP LLC



Principal Place of Business

**3101 TOWERCREEK PKWY
ATLANTA GA 30339**

Mailing Address

**10861 MILL VALLEY RD
OMAHA NE 68154**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



CHECK HERE IF MAKING CHANGES

4. FEI Number **75-2825339**

Applied For
Not Applicable

5. Certificate of Status Desired

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ESTES, WILLIAM J 5605 N. MCARTHUR BLVD., SUITE 360 IRVING TX 75038 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	mgr Consolidated Container Company LLC 3101 Towercreek Pkwy, Ste. 300 Atlanta GA 30339 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CARTER, HENRY 5605 N. MCARTHUR BLVD., SUITE 360 IRVING TX 75038 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE REQUIRED

4-21-03 402934-2442

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (10/02)

Attachment

30062015
#199000000986



Consolidated Container
Company LLC

Let it be known that Douglas P. Horner is hereby authorized by the undersigned officer of Consolidated Container Company LLC ("Company") to act as an agent of the Company in all matters in the ordinary course of business related to payroll withholding taxes, state unemployment taxes, sales & use tax, real estate taxes, personal property taxes, income taxes, franchise taxes and local, county and state licenses and registrations. The authority conveyed by this document includes the authorization to sign returns and other filings relating to the foregoing matters on behalf of the Company and authorization to negotiate and settle tax/fee disputes that arise through audit or through the normal course of events. Company may revoke or limit this authorization at any time in its sole discretion.

Richard P. Sehring
Richard P. Sehring
Vice President Finance and Accounting

9/13/02
Date

Subscribed and sworn to before me this 13th day of SEPTEMBER, 2002

Marilyn M. Smith
Notary Public

