2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P96000086230

Entity Name: RUTLAND PLASTICS, INC.

10021 RODNEY ST.

PINEVILLE, NC 28134

Address:

City-St-Zip:

FILED Sep 28, 2006 Secretary of State

Entity Na	me: RUTLANI	D PLASTICS, INC.			
Current Principal Place of Business:			New Principal Place of Business:		
10021 RO PINEVILLE	DNEY ST. E, NC 28134				
Current Mailing Address:			New Mailing Address:		
10021 RO PINEVILLE	DNEY ST. E, NC 28134				
FEI Number	: 65-0707441	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
515 E. PAI		E RESEARCH,LTD., INC. 01 US	CORPORATION SER 1201 HAYS STREET TALLAHASSEE, FL 3		
	named entity see of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATURE: LAURA R DUNLAP				09/28/2006	
	Electron	ic Signature of Registered Age	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () VADEN, MICHA 10021 RODNE' PINEVILLE, NC	Y STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () LAUD, PAUL 466 SOUTHERI CHATHAM, NJ		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () COLLIER, COL 466 SOUTHERI CHATHAM, NJ	N BOULEVARD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	CFOS () SHACKELFORI	Delete D. FRED	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: MICHAEL VADEN P 09/28/2006