

F06 000003884

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H12000248502 3)))



H120002485023ABCV

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RE-SUBMIT

To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : C T CORPORATION SYSTEM
Account Number : PCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

Please retain original filing
date of submission 10/12

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FILED
12 OCT 12 PM 4:50
DIVISION OF CORPORATIONS
FLORIDA DEPARTMENT OF STATE

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
KORDSA, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	045
Estimated Charge	\$35.00

Attn: Darlene
Connell

Amend.

Electronic Filing Menu

Corporate Filing Menu

Help

10-23-12

DC



October 22, 2012

FLORIDA DEPARTMENT OF STATE
Division of Corporations

KORDSA, INC.
PO BOX 599
HIXSON, TN 37343

SUBJECT: KORDSA, INC.
REF: F06000003884

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

PLEASE REMOVE THE DATE FROM SECTION #4 AS THIS SECTION DOES NOT APPLY TO THE CHANGING OF THE JURISDICTION OF THE CORPORATION.

PLEASE NOTE: AFTER SPEAKING WITH OUR BUREAU CHIEF, BRENDA TADLOCK, WE HAVE DECIDED THAT THE FIRST CERTIFICATE FROM THE STATE OF DELAWARE IS THE CORRECT CERTIFICATE TO USE FOR THIS CHANGE OF JURISDICTION FILING. WE DO HAVE THE CERTIFICATE HERE IN OUR OFFICE AND WILL BE USING IT TO FILE THE DOCUMENT AND "WILL NOT" BEING USING THE CERTIFICATION OF CONVERSION FROM THE STATE OF NORTH CAROLINA.

WE WILL FILE THE DOCUMENT AS SOON AS WE RECEIVE THE CORRECTED APPLICATION REMOVING THE DATE IN SECTION #4.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell
Regulatory Specialist II

FAX Aud. #: H12000248502
Letter Number: 512A00025899

RECEIVED
12 OCT 22 AM 10:07
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314



October 12, 2012

FLORIDA DEPARTMENT OF STATE
Division of CorporationsKORDSA, INC.
PO BOX 599
HIXSON, TN 37343SUBJECT: KORDSA, INC.
REF: F06000003884

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

A FOREIGN CORPORATION WHICH HAS CHANGED ITS NAME, DURATION, OR JURISDICTION SHOULD FILE AN AMENDED APPLICATION. THE FORM SHOULD BE ACCOMPANIED BY A COPY OF THE CERTIFICATE OF CONVERSION CONVERTING THE NORTH CAROLINA CORPORATION INTO A DELAWARE CORPORATION.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell
Regulatory Specialist IIFAX Aud. #: H12000248502
Letter Number: 412A00025307

RECEIVED

12 OCT 19 AM 8:11

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA***RE-SUBMIT***Please retain original filing
date of submission 10/12

P.O BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Kordsa, Inc.
Name of Corporation

DOCUMENT NUMBER: F06000003884

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Name of Contact Person

Firm/Company

Address

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Contact Person _____ at (_____) _____
Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$35.00 Filing Fee☐ \$43.75 Filing Fee & Certificate of Status

☐ \$43.75 Filing Fee & Certified Copy
(Additional copy is enclosed)

☐ \$52.50 Filing Fee.
Certificate of Status &
Certified Copy
(Additional copy is
enclosed)

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO
APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

F06000003884

(Document number of corporation (if known))

1. Kordsa, Inc.
(Name of corporation as it appears on the records of the Department of State)
2. North Carolina 3. 06/01/2006
(Incorporated under laws of) (Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? _____

5. _____
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

Delaware
(New jurisdiction)

8. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

Amy Mohn
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Amy Mohn

(Typed or printed name of person signing)

Treasurer

(Title of person signing)

FILED
12 OCT 12 PM 4:50
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DEPT. OF STATE
TALLAHASSEE, FL

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE DO HEREBY CERTIFY THAT THE CERTIFICATE OF CONVERSION OF
A NORTH CAROLINA CORPORATION TO A DELAWARE CORPORATION OF
"KORDSA, INC.", WAS FILED IN THIS OFFICE ON THE THIRTIETH DAY OF
NOVEMBER, A.D. 2011, AT 1:59 O'CLOCK P.M.

5072459 8317

121123060

You may verify this certificate online
at corp.delaware.gov/authver.shtml




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 9911658

DATE: 10-12-12