

M13000004114

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

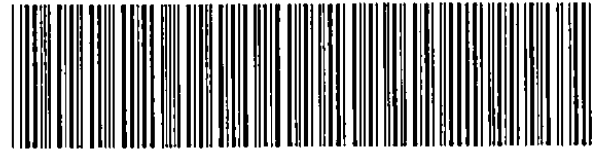
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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MAY 07 2020

CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312

850-656-4724

Date: 5/6/2020

Acc#I20160000072

en: c DW

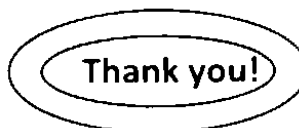
Name:	CONIFEX CROSS CITY LLC
Document #:	
Order #:	12921568 - 34

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

Filing: <input checked="" type="checkbox"/>	Certified: <input checked="" type="checkbox"/>
	Plain: <input type="checkbox"/>
	COGS: <input type="checkbox"/>

Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ 55.00



**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)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: CONIFEX CROSS CITY LLC

Enter new principal office address, if applicable: _____

(Principal office address
MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: _____

(Mailing address
MAY BE A POST OFFICE BOX)

2. The Florida document number of this limited liability company is: M13000004114

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 06/28/2013

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: RESOLUTE CROSS CITY LLC

(must contain "Limited Liability Company," "L.L.C." or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida Street Address

_____, Florida _____
City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 relative 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 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

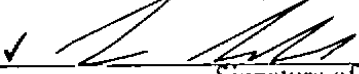
If Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	CONFEX HOLDCO LLC	40 S.W. 10th Street, Cross City, FL 32628	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
MGR/P	SHIELDS, KEN	40 S.W. 10th Street, Cross City, FL 32628	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
M/CFO/S	LEWIS, YURI	40 S.W. 10th Street, Cross City, FL 32628	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
AMBR	RESOLUTE US LUMBER INC.	111 Robert-Bourassa Blvd., Suite 5000 Montreal, Quebec, Canada H3C 2M1	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

9. Attached is a certificate, if required; no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

✓ 
Signature of the authorized representative

Rémi Lalonde

Typed or printed name of signee

Filing Fee: \$25.00

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "CONIFEX CROSS CITY LLC", CHANGING ITS NAME FROM "CONIFEX CROSS CITY LLC" TO "RESOLUTE CROSS CITY LLC", FILED IN THIS OFFICE ON THE FIRST DAY OF MAY, A.D. 2020, AT 5:39 O'CLOCK P.M.




Jeffrey W. Bullock, Secretary of State

5351261 8100
SR# 20203361142

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

Authentication: 202876757
Date: 05-05-20

**CERTIFICATE OF AMENDMENT
TO
CERTIFICATE OF FORMATION
OF
CONIFEX CROSS CITY LLC**

It is hereby certified that:

1. The name of the limited liability company is **CONIFEX CROSS CITY LLC** (hereinafter called the "Company").

2. Pursuant to the Delaware Limited Liability Company Act, the Certificate of Formation of the Company is hereby amended as follows:

Article 1. of the Certificate of Formation of the Company is hereby deleted in its entirety and the following text is inserted in lieu thereof:

1.
**The name of the limited liability company is:
RESOLUTE CROSS CITY LLC**

3. Except as hereby amended, the Certificate of Formation of the Company shall remain unchanged.

4. This amendment shall be effective as of the date of filing of this Certificate of Amendment.

Executed on this 1st day of May, 2020.



Rémi Lalonde, Authorized Person