

**LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # A21159

1. Entity Name

RAYONIER TIMBERLANDS OPERATING COMPANY, L.P., LI

FILED

2002 MAY -8 AM 11:16

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

50 N. Laura St.

Suite, Apt. #, etc.

19th Floor

City & State

Jacksonville, FL

Zip

32202

Country

U.S.A.

3. Mailing Address

Same

Suite, Apt. #, etc.

City & State

4. FEI Number

06-1159803

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

CT Corporation System

Street Address (P.O. Box Number is Not Acceptable)

1200 S. Pine Island Rd.

City

Plantation

FL

Zip Code

33324

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE

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

DATE

9. Capital Contributions
as Shown on record.

50,000,000

10. Amount of Capital Contributions
in FLORIDA to date.

50,000,000

11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

DOCUMENT # P94000000123
NAME Rayonier, Inc.
STREET ADDRESS 50 N. Laura St., 19th Floor
CITY-ST-ZIP Jacksonville, FL 32202

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT # P07967
NAME Rayonier Forest Resources Company
STREET ADDRESS 50 N. Laura St., 19th Floor
CITY-ST-ZIP Jacksonville, FL 32202

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

14. 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

Rayonier Inc

SIGNATURE:

W. Edwin Frazier, III, Secretary

4/22/02 (904)357-9100

CR2E003B (12/01)

**DO NOT WRITE
IN THIS SPACE**

000005610370--8
-05/24/02--01051--024
****526.25 ****526.25