

(Requestor's Name)					
(Address)					
(Ad	dress)				
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates of Status				
Special Instructions to Filing Officer:					





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SECRETARY OF STATE ANII: 13

JUN 0 8 2016 S. YOUNG



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscglobal.com

Date: June 1, 2016

Order#: 149163-151

Re: PLUM CREEK TIMBERLANDS, L.P.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Janis M. Smith c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

SECRETARY OF STATE

## LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1	PLUM CREEK 11			
Na	me of Limited Partnership or L	imited Liability L	imited Partner	ship
2. 08/13/2001		3	3. B0100000276	
Date of filing/registration in Florida			Florida document number	
4. The name of the re Department of State:	gistered agent and the registere	ed office address a	as shown on the	e records of the Florida
	C T CORPORA	ATION SYSTI	EM	
	N	ame		•
	1200 SOUTH PIN	NE ISLAND R	ROAD	
		dress		- <del>o</del>
	PLANTATION	FL	33324	<u>ر</u> 2
	City, Sta	ite and Zip		-
5. The name and Flor	ida street address of the new re	gistered agent an	d/or office:	
	Corporation Se	rvice Compa	ny	
	N	ame		=
	1201 Ha	ys Street		
	Florida street address (	<u> </u>	eptable)	-
	Tallahassee	FI	32301	
	City, Sta	ate and Zip	<u> </u>	-
6 Such change(s) is/s	are effective when filed by the	Florida Denartme	ent of State	
		i iorida 15 opui iiii	iii oi biata.	
ع عور	agnie	_		
Signature of General I	Partner rson on behalf of Plum Creek Timb	er. I. L.L.C., Genera	al Partner	
	pointment as registered agent			. I further agree to
comply with the provi-	sions of all statutes relative to	the proper and co	mplete perforn	
and I am familiar with	an accept the obligations of mon Service Company	ny position as reg	istered agent.	
By: Y OC CO				
Signature of Registere		_		
Grace E. Kirby, Asst. Vi	_			
Filing Fee:	\$35.00			
Certified Copy (o	· · · · · · · · · · · · · · · · · · ·			