

BO4000000541

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

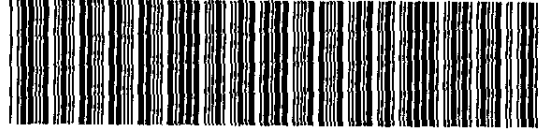
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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04 DEC 16 PM 12:12  
TALLAHASSEE  
STATE  
FLORIDA

CT CORPORATION

December 16, 2004

Department of State, Florida  
409 East Gaines Street  
Tallahassee FL 32399

FILED  
04 DEC 16 PM 12:12  
TALLAHASSEE, FLORIDA

Re: Order #: 6233398 SO  
Customer Reference 1:  
Customer Reference 2:

Dear Department of State, Florida:

Please obtain the following:

Corrugated Services, LP (TX)  
Registration  
Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Stephanie Sanders  
Fulfillment Specialist  
Stephanie\_Sanders@cch-lis.com

660 East Jefferson Street  
Tallahassee, FL 32301  
Tel 850 222 1092  
Fax 850 222 7615

A WoltersKluwer Company

**APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR  
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

1. Corrugated Services, LP  
(Name of limited partnership as it is in the home state)

2. \_\_\_\_\_  
(If name is unavailable, name under which the limited partnership proposes to register or transact business in Florida;  
must contain the word "LIMITED" or "LTD.")


3. Texas 4. June 21, 2000  
(State of Formation) (Date of Formation)

5. Doug Siemon  
(Name of Registered Agent for Service of Process)

6. 25000 Overseas Highway  
(Street Address of Registered Office)

Summerland Key, Florida 33042  
(City) (Zip Code)

7. Acceptance by the Registered Agent for Service of Process:

  
(Agent must sign on this line)

8. 855 E. Highway 80, P.O. Box 847, Forney, Texas 75126

(Address of registered office required in state of formation or, if not required, address of principal office.)

9. NAMES OF GENERAL PARTNERS STREET ADDRESS

CSI GP, Inc. 855 E. Highway 80, P.O. Box 847, Forney, TX 75126

F04000006455

10. 855 E. Highway 80, P.O. Box 847, Forney, TX 75126  
(Office where Names, Addresses and Contributions of Limited Partners are kept.)

11. The limited partnership will undertake to keep the records listing the addresses and capital contributions of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.

CONTINUED

12. 855 E. Highway 80, P.O. Box 847, Forney, TX 75126

(Mailing Address of Limited Partnership)

Under penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 3<sup>RD</sup> day of December, 2004.

[Signature]

General Partner CSI GP, Inc.

STATE OF Texas

By: Forest Felvey, President

COUNTY OF Kaufman

On this 3<sup>rd</sup> day of DECEMBER, 2004.

FOREST FELVEY, personally appeared before me,

☒ who is personally known to me

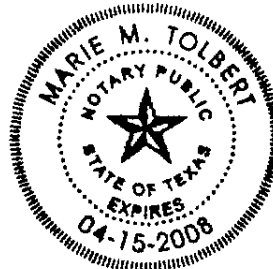
☐ whose identity I proved on the basis of \_\_\_\_\_

[Signature]  
(Notary Public Signature)

MARIE M. TOLBERT  
(Notary's Printed Name)

Seal

My Commission Expires: 4/15/2008



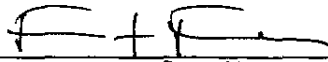
**AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP**

BEFORE ME the undersigned personally appeared Forest Felvey, President of CSI GP, Inc.  
a general partner of Corrugated Services, LP, a (an) Texas  
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 44,108,834
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 0.00.

*Under the penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.*

Signed this 3<sup>RD</sup> day of December, 2004.

  
General Partner

CSI GP, Inc.

By: Forest Felvey, President

STATE OF Texas

COUNTY OF Kaufman

On this 3<sup>rd</sup> day of DECEMBER, 2004,

FOREST FELVEY, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of \_\_\_\_\_

  
(Notary Public Signature)

MARIE M. TOLBERT  
(Notary's Printed Name)

Seal

My Commission Expires: 4/15/2008

