

SUBJECT:	Ketchi Kan (Name of co	poration - must include suff	fix)
Dear Sir or Madam	:	-	. — »
The enclosed "App" "Certificate of Exis transact business in	tence", and check are submit	tion for Authorization to Tra tted to register the above ref	ensact Business in Florida", ferenced foreign corporation to
Please return all co	rrespondence concerning thi	s matter to the following:	
			2000030864829 01/03/0001128018
	Ann B. Mahone	Name of Person)	*****78.75 *****78.75
			Fr. 0
	Louisiana-Pacific	Firm/Company)	LE O
		Aughul	AN- F
	III S.W. Fifth	(Address)	FILED -3 PM ASSEE.
		222	FILED OO JAN -3 PM 12: 4 SECRETARY OF STAT ALLAHASSEE, FLOR
	Portland, OR	(City/State/Zin)	
		(CIG/Ballor 2-p)	10 to
_		this matter inlease call:	
Should you need	to call someone concerning	ums matter, presses	TAN-114
		(503) 821-511	16 100 111
Lynn Shir	of Person)	(Area Code & Daytime	Telephone Numbers
(Name o	i reison)	`	A. A. Carlotte
			See
STREET ADDR	RESS:	MAILING AD	DRESS:
		Registration Sec	ction Up-1/ or
Registration Sect Division of Corp	ion orations	Division of Cor	porations Variyer
409 E. Gaines St		P.O. Box 6327 – Tallahassee, FL	Acknowing frient
Tallahassee, FL		- Talianassee, FD	W. P. Verry
Enclosed is a ch	eck for the following amoun	t:	
☐ \$70.00 Filing		ee & 3 \$78.75 Filing F	Fee & Section \$87.50 Filing Fee, Certificate of Status &
_ ψ, υ, υ, υ τ ττητε	Certificate of S	Status Certified Copy	Certified Copy

ouisiana-Pacific Corporation

Ann B. Mahone Stockholder Relations Manager

111 S.W. Fifth Avenue Portland, Oregon 97204 503/221-0800 503/821-5323 FAX

December 20, 1999

Florida Department of State Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Ladies and Gentlemen:

I enclose on behalf of subject corporation:

- Application by Foreign Corporation for Authorization to Transact Business (1) in Florida;
- Check for \$78.75 payable to Florida Department of State representing (2) payment of the filing fee and certified copy; and
- Original Certificate of Good Standing from state of incorporation (3) (Washington).

Please call my assistant, Lynn Shirey, at (503) 821-5116, if you have any questions regarding this filing.

Very truly yours,

Ann B. Mahone

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ABM:lcs **Enclosures**

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

REGISTER A POICE ON COM CHAPTER TO THE COMP	
1. Ketch: kan Pulp Company (Name of corporation; must include the word "INCORPORATED", words or abbreviations of like import in language as will clearly indi natural person or partnership if not so contained in the name at prese	icate that it is a corporation histeau of a
2. Washing ton (State or country under the law of which it is incorporated) 3	(FEI number, if applicable)
4. $\frac{\frac{12}{31}\frac{47}{}}{\text{(Date of incorporation)}}$ 5. Duration	Perpetual
	Prop
6. Upon qualification (Date first transacted business in Florida. If corporation has not trans	
(SEE SECTIONS 607.1501, 607.1	1502 and 817.155, F.S.)
7. a. P.O. Box 6600, Ketchikan, AK 9990 (Principal office address)	7.5
	OR L
b. P.O. Box 6600, Ketch: Kan, AK 999 (Current mailing address)	101 ST 2
(Current mailing address)	
8. Timber and acquisition and harvest. (Purpose(s) of corporation authorized in home state or country) 9. Name and street address of Florida registered agent: (P.O.	
Name: <u>Corporation Service Company</u> Office Address: <u>1201 Hays Street</u>	
Office Address: 1201 Hays Street	
Tallahassee	, Florida 3230/ (Zip code)
10. Registered agent's acceptance:	
Having been named as registered agent and to accept service of procing this application, I hereby accept the appointment as registered age comply with the provisions of all statutes relative to the proper and cannot accept the obligations of my position as registered agent.	ont and agree to act in inis capacity. I juille as con-
Lame welma	
(Registered agent's signat	ure)
	d oo l and a livery of this application to the

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and l	business addresses of officers and/or directors:	
A. DIRECTOR	Rs' - see attached	
Chairman:		
Address:		
Vice Chairman:	1:	
Director:		
Address:		
		ASS OF THE PERSON OF THE PERSO
		AR A T
B. OFFICE	CRS - see attached	FILED TARY OF
President:		F 57 72:
Address:		
Vice President	nt:	
Address:		
Secretary:		
Address:		
 -		
Treasurer:		
Address:		
NOTE: If n	necessary, you may attach an addendum to the application listing additional officers and/or dire	ctors.
13	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application	ion)
	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the approximation of the control o	
14	Anton C. Kirchhof, Secretary (Typed or printed name and capacity of person signing application)	

STATE of WASHINGTON



SECRETARY of STATE

I, RALPH MUNRO, Secretary of State of the State of Washington and custodian of its seal,
hereby issue this

CERTIFICATE OF EXISTENCE/AUTHORIZATION

OF

KETCHIKAN PULP COMPANY

I FURTHER CERTIFY that the records on file in this office show that the above named profit corporation was formed under the laws of the State of Washington and was issued a Certificate of Incorporation in Washington on December 11, 1951.

I FURTHER CERTIFY that as of the date of this certificate, no Articles of Dissolution have been filed, and that the corporation is duly authorized to transact business in the corporate form in the State of Washington.



Date: December 6, 1999

Given under my hand and the Seal of the State of Washington at Olympia, the State Capital



Ralph Munro, Secretary of State