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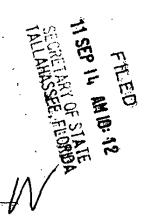
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## DISSOLUTION OR WITHDRAWAL RAYONIER DISTRIBUTION CORP.

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9/14/2011

## COVER LETTER

	menament Section ivision of Corporations
SUBJEC	T: Rayonier Distribution Corp.
	(Name of Corporation)
DOCUM	ENT NUMBER: F03000004642
The enclo	sed withdrawal application and fee are submitted for filir 3.
	urn all correspondence concerning this the following:
-	(Name of Person)
	(Firm/Company)
•	(Address)
~	(City/State and Zip code).
For furthe	r information concerning this matter, please call:
	at (
	(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

MAILING ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tall:hassee, FL 32301

## TI SEP IL AM 10: 13 SECRETARY OF STATE APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWFALLORIE AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

(Name of Corporation)

Rayonier Distribution Corp.

ķ.

F03000004642 (Document Number of Corporation (if k town)			
•			
Delaware			
(Incorporated Under Law	9 Of)		
This corporation is no longer transacting business or conducting voluntarily surrenders its authority to transact business or conducting			
This corporation revokes the authority of its registered agent is appoints the Department of State as its agent for service of process time it was authorized to transact business or conduct affairs in Fi	ss base: on a cause of action arising during the		
The following is a current mailing address for the corporation:			
1301 Riverplace Boulevard, Suite 2300 (Mailing Address)			
Jacksonville, FL 32207 (City/ State /Zip)			
(City/ State/Zip)			
The corporation agrees to notify the Department of State in the ful	ture of any change in its mailing address.		
1/1/5	9/12/2011		
(Signature of a director, president or other officer - if in the hands of a recover or other court appointed flunciary, by that fiduciary)	(Date)		
Michael R. Herman (Typed or peinted name of person signing)	Vice President		
	(Title of person signing)		

FILING FEE \$35