

F09000002417

Florida Department of State  
Division of Corporations  
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**\*RE-SUBMIT\***

To:

Division of Corporations  
Fax Number : (850) 617-6380

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date of submission 3/13

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
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Email Address: \_\_\_\_\_

**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
DIVERSI-PLAST PRODUCTS, INC.**

Certificate of Status	0
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Page Count	07
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2012 MAR 13 AM 10:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ASR  
3/15/12

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March 14, 2012

FLORIDA DEPARTMENT OF STATE  
Division of CorporationsDIVERSI-PLAST PRODUCTS, INC.  
5600 NORTH HWY 169  
MINNEAPOLIS, MN 55428SUBJECT: DIVERSI-PLAST PRODUCTS, INC.  
REF: F09000002417

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please correct the document number at the top of page one of the amendment form. The correct document number is F09000002417.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Annette Ramsey  
Regulatory Specialist IIFAX Aud. #: H12000066390  
Letter Number: 812A00009271**\*RE-SUBMIT\***Please retain original filing  
date of submission 3/13RECEIVED  
12 MAR 14 AM 8:07  
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Diversi-Plast Products, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** FO9000002417

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Diane O'Brien  
Name of Contact Person

Liberty Diversified Industries, Inc.  
Firm/Company

5600 North Highway 169  
Address

New Hope, MN, 55428  
City/State and Zip Code

dianobrien@libertydiversified.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Diane O'Brien at ( 763 ) 536.6618  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$15.00 Filing Fee    ☐ \$43.75 Filing Fee & Certificate of Status    ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)    ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**PROFIT CORPORATION**  
**APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO**  
**APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**  
(Pursuant to s. 607.1504, F.S.)

**SECTION I**  
**(1-3 MUST BE COMPLETED)**

FO9000002417

(Document number of corporation (if known))

1. Diversi-Plast Products, Inc.  
(Name of corporation as it appears on the records of the Department of State)
2. Minnesota 3. 06/16/2009  
(Incorporated under laws of) (Date authorized to do business in Florida)

**SECTION II**  
**(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)**

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 02/07/2012

5. Verscom Inc.  
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

\_\_\_\_\_  
(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

\_\_\_\_\_  
(New jurisdiction)

8. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

Ronda Bayer  
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Ronda Bayer  
(Typed or printed name of person signing)

Vice President  
(Title of person signing)

# Office of the Minnesota Secretary of State

## Minnesota Business & Nonprofit Corporations

### Amendment to Articles of Incorporation

Minnesota Statutes, Chapter 302A or 317A



Read the instructions before completing this form.

Filing Fee: \$35.00 per form

1. Corporate Name: (Required)

Diversi-Plast Products, Inc.

List the name of the company prior to any desired name change

2. This amendment is effective on the day it is filed with the Secretary of State, unless you indicate another date, no later than 30 days after filing with the Secretary of State.

Format: (mm/dd/yyyy)


3. The following amendment(s) to articles regulating the above corporation were adopted: (Insert full text of newly amended article(s) indicating which article(s) is (are) being amended or added.) If the full text of the amendment will not fit in the space provided, attach additional pages.

#### ARTICLE 1.

The name of the corporation is Verscene Inc.

4. This amendment has been approved pursuant to Minnesota Statutes, Chapter 302A or 317A.

5. I, the undersigned, certify that I am signing this document as the person whose signature is required, or as agent of the person(s) whose signature would be required who has authorized me to sign this document on his/her behalf, or in both capacities. I further certify that I have completed all required fields, and that the information in this document is true and correct and in compliance with the applicable chapter of Minnesota Statutes. I understand that by signing this document I am subject to the penalties of perjury as set forth in Section 609.48 as if I had signed this document under oath.

 Ronda Bayer, VP, General Counsel & Sec.  
Signature of Authorized Person or Authorized Agent

January 20, 2012

Date

#### Email Address for Official Notices

Enter an email address to which the Secretary of State can forward official notices required by law and other notices:

dianeobrien@libertydiversified.com

☐ Check here to have your email address excluded from requests for bulk data, to the extent allowed by Minnesota law.

List a name and daytime phone number of a person who can be contacted about this form:

Diane O'Brien, Paralegal

763 536-6618

Contact Name

Phone Number

Entities that own, lease, or have any financial interest in agricultural land or land capable of being farmed must register with the Department of Agriculture.

Does this entity own, lease, or have any financial interest in agricultural land or land capable of being farmed?

Yes ☐ No ☒

**STATE OF MINNESOTA**

DEPARTMENT OF STATE

I hereby certify that this is a  
true and complete copy of the  
document as filed for record in  
this office.

DATED 03/12/2012

Mark Ritchie

Secretary of State



By

A handwritten signature, likely of Mark Ritchie, written over a horizontal line.



**Work Item 465890500026**  
**Original File Number 8M-660**

**STATE OF MINNESOTA**  
**OFFICE OF THE SECRETARY OF STATE**  
**FILED**  
**02/07/2012 4:30 PM**

*Mark Ritchie*

Mark Ritchie  
Secretary of State