

**F15000003320**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H15000183599 3)))



H150001835993ABC8

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 205-8842  
Fax Number : (850) 878-5368

RECEIVED  
15 JUL 29 AM 7:49  
TALLAHASSEE, FLORIDA

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FOREIGN PROFIT/NONPROFIT CORPORATION**

**Hood Flexible Packaging Corporation**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

RECEIVED  
15 JUL 29 AM 10:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

JUL 30 2015  
J. HARRIS

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Hood Flexible Packaging Corporation  
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

John A. Burnam

Name of Person

Hood Flexible Packaging Corporation

Firm/Company

623 N. Main Street, Suite 200

Address

Hattiesburg, MS 39401

City/State and Zip code

mcfountain@bellsouth.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John A. Burnam

Name of Person

at ( 601 ) 583-7300

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**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.*

1. Hood Flexible Packaging Corporation

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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

2. Mississippi

(State or country under the law of which it is incorporated)

3. 64-0919244

(FEI number, if applicable)

4. October 20, 1999

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. \_\_\_\_\_

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 623 N. Main Street, Suite 200, Hattiesburg, MS 39401

(Principal office address)

Post Office Box 1828, Hattiesburg, MS 39403-1828

(Current mailing address)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

Florida 33324

(Zip code)

**9. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

C T Corporation System

By: \_\_\_\_\_

(Registered agent's signature)

Danny Verdecchia, Jr. Asst. Secretary

10. 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.

FILED  
15 JUL 29 AM 7:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11. Names and business addresses of officers and/or directors;

**A. DIRECTORS**

Chairman: Warren A. Hood, Jr.,

Address: 623 N. Main Street

Hattiesburg, MS 39401

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Robert Morris

Address: 25 Woodgreen Place

Madison, MS 39110

Vice President: John A. Johnson

Address: 623 N. Main Street

Hattiesburg, MS 39401

Secretary: John A. Burnam

Address: 623 N. Main Street, Hattiesburg, MS 39401

Treasurer: Warren A. Hood, Jr.,

Address: 623 N. Main Street, Hattiesburg, MS 39401

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. \_\_\_\_\_

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. John A. Burnam, Secretary

(Typed or printed name and capacity of person signing application)

FILED  
15 JUL 29 AM 7:49  
STATE OF MISSISSIPPI  
HATTIESBURG, MISSISSIPPI



DELBERT HOSEMANN  
*Secretary of State*

Office of the Secretary of State  
Jackson, Mississippi

### Certificate of Good Standing

I, C. DELBERT HOSEMANN, JR., Secretary of State of the State of Mississippi, and as such, the legal custodian of the records as required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on the 20th day of October, 1999, the State of Mississippi issued a Charter/ Certificate of Authority to

**HOOD FLEXIBLE PACKAGING CORPORATION.**

That the state of incorporation is Mississippi.

That the period of duration is perpetual.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.

That insofar as the records of this office are concerned, the said HOOD FLEXIBLE PACKAGING CORPORATION is in good standing at this time.

Given under my hand and seal of office  
the 29th day of July, 2015

A handwritten signature in cursive script, reading "C. Delbert Hosemann, Jr.", written over a horizontal line.

C. DELBERT HOSEMANN, JR.  
*Secretary of State*

Certificate Number: CN15012624

Verify this certificate online at <http://corp.sos.ms.gov/corpcnv/verifycertificate.aspx>