

4/26/2019

Division of Corporations

**F1900002036**

Florida Department of State  
Division of Corporations  
Section of Business Regulation

**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.**

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To:

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

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (614)280-3338  
Fax Number : (954)208-0845

**\*\*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

**Roseburg Forest Products. Co.**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 1       |
| Page Count            | 04      |
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APR 29 2019

## 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. ROSEBURG FOREST PRODUCTS CO.  
(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. OREGON 3. 93-1240670  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. MARCH 26, 1998 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than 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. 3660 GATEWAY STREET, SPRINGFIELD, OR 97477  
(Principal office address)
- \_\_\_\_\_ (Current mailing address, if different)

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, Florida 33324  
(City) (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: Phally Sea Phally Sea Asst. Secretary  
(Registered agent's signature)

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.

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## 11. Names and business addresses of officers and/or directors:

**A. DIRECTORS**Chairman: ALLYN FORDAddress: 3660 GATEWAY STREET  
SPRINGFIELD, OR 97477Vice Chairman: ERIC FORDAddress: 3660 GATEWAY STREET  
SPRINGFIELD, OR 97477

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

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

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

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

**B. OFFICERS**President: GRADY MULBERYAddress: 3660 GATEWAY STREET  
SPRINGFIELD, OR 97477Vice President: P. MARTIN DALEYAddress: 3660 GATEWAY STREET  
SPRINGFIELD, OR 97477Secretary: STUART GRAYAddress: 3660 GATEWAY STREET, SPRINGFIELD, OR 97477Treasurer: P. MARTIN DALEYAddress: 3660 GATEWAY STREET, SPRINGFIELD, OR 97477**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.12. Stuart W. Gray Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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. STUART GRAY, SVP, GENERAL COUNSEL AND SECRETARY

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

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DEPARTMENT OF STATEAPPROVED  
AND  
FILED

# State of Oregon

OFFICE OF THE SECRETARY OF STATE  
Corporation Division

## Certificate of Existence 263D213K5

I, **LESLIE CUMMINGS**, DEPUTY SECRETARY OF STATE and Custodian of the Seal of said State, do hereby certify:

**ROSEBURG FOREST PRODUCTS CO.**

is

Incorporated

under the laws of The State of Oregon

and is active on the records of the Corporation Division as of the date of this certificate.

In Testimony Whereof, I have hereunto set  
my hand and affixed hereto the Seal of the  
State of Oregon.



A handwritten signature in cursive script, reading "Leslie Cummings".

**LESLIE CUMMINGS, DEPUTY SECRETARY OF STATE**

3/11/2019

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AND  
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