

L10000129868

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

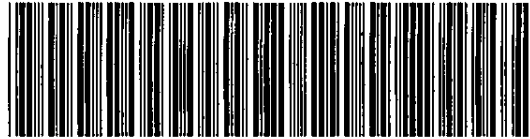
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400282443054

02/23/16--01026--006 **35.00

FILED

16 FEB 23 AM 11:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FEB 25 2016
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Rex 2010, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

CAROL ANNE FRANAS, CMA
Name of Person

WESTROCK COMPANY
Firm/Company

504 THRASHER STREET
Address

NORCROSS GA 30071
City/State and Zip Code

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

For further information concerning this matter, please call:

CAROL ANNE FRANAS at (678) 291-7423
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee ☒ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

+ 500 certificate
of status

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



504 Thrasher Street
Norcross, GA 30071

office: 770.448.2193
westrock.com

Direct Dial 678-291-7423
carol.francis@westrock.com

February 22, 2016

Via Federal Express

Florida Department of State
2661 Executive Center Circle
Tallahassee, Florida 32301

Re: Rex 2010, LLC
Change of Name

Dear Sir or Madam:

Please find enclosed the following documents:

1. Cover letter;
2. Articles of Amendment to Articles of Organization of Rex 2010, LLC; and
3. Check No. 14558822 in the amount of \$35.00.

Please file the articles of amendment and return a certified copy (\$30.00) and a certificate of status (\$5.00). If you have any questions or need additional information, please do not hesitate to contact me at your convenience.

Sincerely,

A handwritten signature in black ink that reads "Carol Anne Francis".

Carol Anne Francis, CLA

Enclosures

Rex 2010, LLC

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member


<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	WestRock Converting Company	504 Thrasher Street Norcross, GA 30071	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change

RECEIVED
FEB 28 AM 11:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated 2/21, 2016



Signature of a member or authorized representative of a member

WARD H DICKSON
Typed or printed name of signee

FILED
16 FEB 23 AM 11:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA