5/17/2021

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet RESUBMIT USING ORIGINAL FILE DATE OF 5/17/2021

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(((H210001971473)))



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Division of Corporations

Fax Number : (850)617-6383

To:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 : (850)521-0821 : (850)558-1515

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

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PRATT (CORRUGATED LOGISTICS), LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
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Electronic Filing Menu Corporate Filing Menu

Help

850-617-6381 6/3/2021 12:39:32 PM PAGE 1/001 Fax Server



June 3, 2021

FLORIDA DEPARTMENT OF STATE

PRATT (CORRUGATED LOGISTICS), LLC Division of Corporations

1800-C SARASOTA PARKWAY CONYERS, GA 30013

SUBJECT: PRATT (CORRUGATED LOGISTICS), LLC

REF: M05000003586

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.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L20000062309.

If you have any questions concerning the filing of your document, please call (850) 245-6939.

Agnes Lunt FAX Aud. #: H21000197147
Regulatory Specialist III Letter Number: 721A00012061



May 18, 2021

FLORIDA DEPARTMENT OF STATE

PRATT (CORRUGATED LOGISTICS), LLC Division of Corporations 1800-C SARASOTA PARKWAY CONYERS, GA 30013

SUBJECT: PRATT (CORRUGATED LOGISTICS), LLC

REF: M05000003586

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.

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C., " or the designation "LLC." The following suffixes are no longer acceptable : "Limited Company," "L.C., " and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

The conflict is L20000062309.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tracy L Lemieux FAX Aud. #: H21000197147 Letter Number: 721A00010471 Regulatory Specialist II

COVER LETTER

	Registratio Division o	on Section f Corporations			
SUBJE	CT: Prett	(Corrugated Logistics), LLC			
		Name of Forci	gn Limited L	iability Co	ompany
Dear Si	r or Madan	ı:			
The erre	tosed appli	cation, certificate and fee(s)	are submitte	d for filin	g.
Please r	eturn all co	prespondence concerning th	is matter to t	he followi	ពិន្ន:
Peg Fai	rbanks				
· · · · · · · · · · · · · · · · · · ·	***************************************	Name of Person			
Pratt Lo	gistics, Luc	•			
***************************************		Firm/Company			
3535 Pi	edmont Roc	ad NE Bldg 14 Ste 440			
	·	Address	· ,		
Atlanta (GA 30305				
	***************************************	City/State and Zip Cod	e	••••	
		dustries.com			
E-ma	il uddress:	to be used for future annua	report notifi	extion)	
For furt	ter informa	ition concerning this matter.	, please call:		
Peg Fail	rbanks		91 (24211	201
	Na	me of Person			time Telephone Number
<u>;</u>	Mailing Add	bress:		Street	.ddress:
	Registratio	n Section			ration Section
		f Corporations			on of Corporations
	P.O. Box 6				mire of Tallahassee
,	Tallahasse	e. FL 32314			i, Monroe Street, Seite 810 ussee, FL 32303
;	Enclosed i	s a check for the following	amount:		
		🗆 \$30 Filing Fee &	□ \$55 Filir		
		Certificate of Status	Certified	Copy	Certificate of Status & Certified Copy
CR2E955	(9/15)				a colorience a obili

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT **BUSINESS IN FLORIDA**

SECTION 141-4 must be completed)

State: Pratt (Corrugated Logistics), LLC				
Enter new principal office address, if applicable:				
(Principal office address	1800-C Sarasota Pkwy			
MUST BE A STREET ADDRESS)	Conyers, GA 30013			
Enter new mailing address, if applicable: (<u>Mailing address</u> MAY BE A POST OFFICE BOX)				
		W) ex	2	
The Fiorida document number of this limited by the finite of the limited by the first organization: Delaware The authorized to do business in Florida:	lability company is: M05000003586		<u>≅</u>	
3. Jurisdiction of its organization: Delaware		NSS.	<u>יל</u>	ר ורני
4. Date authorized to do business in Florida: 08.	/31/2009	me.	=	ć
4. Date authorized to do business in Florida:	e changes)	104 104 105	AM II: I	
5. New name of the limited liability company: [mail:	Pratt Logisiècs, ULC	<u>Ş</u>		
(m	ist contain "Limited Unbility Company, " "	LLC," or "Lt	.C.**}	
Corrugated Logistics, LLC		255 - 13 4 4		
(if name unavailable, enter alternate name adopte copy of the written consent of the managers of must contain "Limited Liability Company," "L.L.	iangging stembers adopting the afternate as	r rights and are me. The alternat	e name	
6. If amending the registered agent and/or regists registered agent and/or the new registered office	cred officer address on our records, <u>enter the</u> <u>address here:</u>	e name of the ce	<u>w</u>	
Name of New Registered Agent:			•••••	
New Registered Office Address:	Enter Florida Street A	ddress	•••••	
•••	City	Zip Code		
New Registered Agent's Signature, if changing I have by accept the appointment as registered as the provisions of all statutes relative to the propand accept the obligations of my position as regionament is being filed to merely reflect a changitability company has been notified in writing of	Registered Agent: gent and agree to act in this capacity. I furth er and complete performance of my duties, isvered agent as provided for in Chapter 60 go in the registered office address. I hereby	her agree to com and Lam familia 5. F.S. Or-if this	iply witi with	

If Changing Registered Agent, Signature of New Registered Agent

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le/Capacity	Name	Address	Type of Action						
			Cadd						
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aforementioned	er the law of which this entity is orga	the official having custody of records in the	CRemo						

Filing Fee: \$25.00



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THAT THE SAID "PRATT (CORRUGATED
LOGISTICS), LLC", FILED A CERTIFICATE OF MERGER, CHANGING ITS
NAME TO "PRATT LOGISTICS, LLC" ON THE SIXTEENTH DAY OF JUNE,
A.D. 2020, AT 11:54 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

2021 MAY 17 AM II : II



Authentication: 203219781

Date: 05-17-21

3979977 8320 SR# 20211823258