

3/10/2014 12:56:41 From: To: 8506176383 (1/3)
Division of Corporations Page 1 of 1
#1107000004770

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA0000000023
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**LLC REGISTERED AGENT CHANGE
BUCKEYE BUILDING FIBERS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

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Help

K. SALY
EXAMINER
MAR 11 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BUCKEYE BUILDING FIBERS LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Susan Mebane

Name of Person

Georgia-Pacific LLC

Firm/Company

133 Peachtree Street NE, Floor 41

Address

Atlanta, GA 30303

City/State and Zip Code

susan.mebane@gapac.com

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

For further information concerning this matter, please call:

Susan Mebane

Name of Person

at (404) 652-2661

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Buckeye Building Fibers LLC
2. (a) 133 Peachtree Street, NE
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
Atlanta, GA 30303
- (b) _____
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
3. 08/07/2007
Date of filing/registration in Florida
4. M07000004770
Document number
5. (a) CORPORATION SERVICE COMPANY
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
1201 HAYS STREET TALLAHASSEE, FL 32301-2525
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

_____, FL _____
- (b) CT Corporation System
Enter name of NEW Registered Agent and/or NEW Registered Office address:
1200 South Pine Island Road, Plantation, FL 33324
NEW Registered Office Address:

_____, FL _____

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

MARK D. BERRY, ASSISTANT SECRETARY
Printed or typed name of signer

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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Connie Bryan
Signature of Registered Agent

Connie Bryan
Assistant Secretary

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00