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Florida Department of State
Division of Corporations
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ATTN: DEBORAH

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

PLEASE ALSO MAKE SURE THIS GETS THE SUBMIT DATE OF THE 25TH.

From:
Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850)521-1000
Fax Number : (850)558-1515

MATT YOUNG
850-521-0821
ext 2962

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

Email Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY REINSTATEMENT
BERLIN PACKAGING L.L.C.

Certificate of Status	0
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LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
11 MAR 25 AM 8:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CR2E041 (05/10)

DOCUMENT # M08000001124

1. Limited Liability Company's Name
Berlin Packaging L.L.C.

2. Principal Office Address - No P O Box #	3. Mailing Office Address
525 W. Monroe St	525 W. Monroe St
Suite, Apt. #, etc.: 14th floor	Suite, Apt. #, etc.: 14th floor
City & State: Chicago IL	City & State: Chicago IL
Zip: 60661-3648 Country: U.S.A.	Zip: 60661-3648 Country: U.S.A.

4. State/Country of Formation: Delaware / USA
5. Date Organized or Qualified To Do Business in Florida: 12-23-97
6. FEI Number: 36-4200226 ☐ Applied For ☐ Not Applicable
7. CERTIFICATE OF STATUS DESIRED ☐ $5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name: Corporation Service Company
Street Address (P.O. Box Number is Not Acceptable): 1201 Hays Street
Suite, Apt. #, Etc.:
City: Tallahassee State: FL Zip Code: 32301

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of Registered Agent: [signature] REGISTERED AGENT MUST SIGN
Matthew Young
~~Asst. V. Pres.~~
Date: 3-25-11

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	Maple Hill Acquisition L.L.C.	525 W. Monroe St. 14th Floor	Chicago / IL / 60661-3648
MGRM	Andrew T. Berlin	525 W. Monroe St. 14th Floor	Chicago / IL / 60661-3648
MGR	Neil R. Schwab	525 W. Monroe St. 14th Floor	Chicago / IL / 60661-3648
	REINSTATEMENT 10-11 DB		

11. E-mail Address: (To be used for future annual report notifications)

12. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in Chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath

Signature of Managing Member/Manager: [signature] Date: 3/23/11 Daytime Phone #: 312 876 9292

Typed or printed name of signing Managing Member/Manager: Andrew T. Berlin