(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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16 MAY 10 AM 10: 05

MAY 11 2016 S. YOUNG CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500	
ACCOUNT NO. : I2000000195	
REFERENCE : 135379 7724462	
AUTHORIZATION : Spress eleman	
COST LIMIT : \$ 25.00	
ORDER DATE : May 10, 2016	SECT TALL
ORDER TIME : 9:39 AM	AHE TA
ORDER NO. : 135379-005	SSEE.
CUSTOMER NO: 7724462	E, FLORIDA
	ਤਤੁਜ
FOREIGN FILINGS	
NAME: SP FIBER TECHNOLOGIES SOUTHEAST, LLC	

CORPORATE LIMITED PARTNERSHIP XX LIMITED LIABILITY COMPANY
XXXX AMENDMENT
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Courtney Williams EXT# 62935
EXAMINER:

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

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears	s on the records of the Florida Department of	
State: SP Fiber Technologies Sou	theast, LLC	
Enter new principal office address, if applicable:	504 Thrasher Street	-
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)	Norcross, Georgia 30071	
Enter new mailing address, if applicable: (Mailing address	504 Thrasher Street Norcross, Georgia 30071	16 HAY 1
MAY BE A POST OFFICE BOX)		· 🔾
2. The Florida document number of this limited lia	bility company is: M14000001226	NH 10: 05
3. Jurisdiction of its organization: Delaware		
4. Date authorized to do business in Florida: 02/	20/2014	
SECTION II (5-9 complete only the applicable of		,
5. New name of the limited liability company: W	estRock Southeast, LLC	
(must	contain "Limited Liability Company," "L.L.C.," or "LLC."	")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or mar must contain "Limited Liability Company," "L.L.C	for the purpose of transacting business in Florida and attach naging members adopting the alternate name. The alternate na." or "LLC.")	a ime
6. If amending the registered agent and/or registerer registered agent and/or the new registered office ad	d officer address on our records, enter the name of the new	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida Street Address	
	, Florida	
the provisions of all statutes relative to the proper of and accept the obligations of my position as registe	gistered Agent: at and agree to act in this capacity. I further agree to comply and complete performance of my duties, and I am familiar wi ared agent as provided for in Chapter 605, F.S. Or, if this in the registered office address, I hereby confirm that the limi	ith

tle/ Capacity	<u>Name</u>	Address	Type of Action
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forementioned am	cate, if required: no more than 90 da endment(s), duly authenticated by the ne law of which this entity is organiz	e official having custody of recor	

Typed or printed name of signee
Filing Fee: \$25,00

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID "SP FIBER TECHNOLOGIES

SOUTHEAST, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS

NAME TO "WESTROCK SOUTHEAST, LLC" ON THE EIGHTEENTH DAY OF

DECEMBER, A.D. 2015, AT 5:18 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF AMENDMENT IS THE FOURTH DAY OF JANUARY, A.D. 2016.

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.

SECTRETARY OF STANSA.
TALLAHASSEE, FLORASA.
16 MAY 10 AM 10: 05



5198877 8320 SR# 20163017292 Authentication: 202291734

Date: 05-10-16