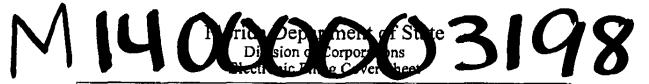
Division of Corporations

Page 1 of 1



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023 Phone : (850)222-1092

Fax Number : (850)878-5368

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

n : 1	Address:			
N. HEAT L	ACCTORS!			

Foreign Limited Liability Company XPEDX, LLC

Certificate of Status 0 Certified Copy Page Count 05 \$155.00 Estimated Charge

- MAY 12 2014 J. HARRIS

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Corporate Filing Menu

Help

COVER LETTER

The enclosed "Application by Foreign Lim Existence, and check are submitted to regis Please return all correspondence concernin Michelle R. King International Paper Comp	Name of Person
Please return all correspondence concernin Michelle R. King International Paper Comp	ster the above referenced foreign limited liability company to transact business in Floring this matter to the following: Name of Person pany Firm/Company
Michelle R. King International Paper Comp	Name of Person pany Firm/Company
International Paper Comp	Pany Firm/Company
	Pany Firm/Company
	Firm/Company
6400 Poplar Avenuo	
6400 Poplar Avenuo	Address
	Whites
Memphis, TN 38197	
	City/State and Zip Code
Stephen,Smlth3@ipsper.c	com.
E-mai	il address: (to be used for future annual report notification)
for further information concerning this ma	uter, please call:
Michelle R. King	at (901) 419-3870
Name of Contact	
MAILING ADDRESS:	STREET ADDRESS:
Division of Corporations	Division of Corporations
Registration Section	Registration Section Clifton Building
P.O. Box 6327 Tallahassec, FL 32314	2661 Executive Center Circle
t ditaliasion (C 32314	Taliahassee, FL 32301
inclosed is a check for the followin	
	0.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee, Certificate ifficate of Status Certified Copy of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	name unavailable, enter alternate name adopted for the purpose of transacting business in Floride. The alternate name must include "Limited billity Company," "L.L.C," or "L.L.C.")
2.	New York 3, 46-466-3631
	Jurisdiction under the law of which foreign limited liability (PEI number, if applicable) company is organized)
4,	Upon Qualification
	(Date first transacted business in Florida, If prior to registration.) (See sections 605.0904 & 605.0905, P.S. to determine penalty liability)
5.	6285 Tri-Ridge Boulevard, Loveland, OH 45140
	(Street Address of Principal Office)
6.	Same
	(Malling Address)
7.	The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Int	ernational Paper Company, solo member, 6400 Poplar Avenue, Memphis, TN 38197
_	
ba acı	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official ving custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not ceptable. If the certificate is in a foreign language, Translation of the certificate under oath of the translator ast be submitted)

International Paper Company, sole member, by Marla F. Adair, Asst. Secy. Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

If unavailable, the alternate to be used in the state of Florida is:	
·····	
2. The name and th	e Florida street address of the registered agent and office are:
	C T Corporation System
	(Namo)
	1200 South Pine Island Road
 -	1200 South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE)

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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, Florida Statutes.

By: James M. Halpin
Assistant Secretary
(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

14 HAY -9 AM IO: 52

State of New York Department of State } ss

I hereby certify, that XPEDX, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 01/24/2014, and that the Limited Liability Company is existing so far as shown by the records of the Department.



of the Department of State at the City of Albany, this 08th day of May two thousand and fourteen.

Witness my hand and the official seal

Anthony Glardina

Executive Deputy Secretary of State

201405090438 * EZ