

M14000005808

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

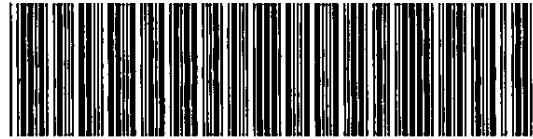
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

2/3

W17-6007 Cus Event

Office Use Only



800293875628

01/20/17--01023--003 \*\*25.00

FILED  
2017 FEB -3 AM 10:51

M. MILLIGAN  
FEB 09 2017



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 23, 2017

THE LYME TIMBER CO LLP  
CINDY CHAVES  
23 S MAIN ST, 3RD FL  
HANOVER, NH 03755

SUBJECT: CROSS CITY FOREST PRODUCTS LLC  
Ref. Number: M14000005808

RECEIVED  
2017 FEB -3 PM 4:36  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

We have received your document for CROSS CITY FOREST PRODUCTS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

~~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.

~~Karen A. Saly~~  
~~Regulatory Specialist II~~

Letter Number: 417A00001369

**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 on the records of the Florida Department of

State: CROSS CITY FOREST PRODUCTS LLC

Enter new principal office address, if applicable: \_\_\_\_\_

(Principal office address  
MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: \_\_\_\_\_

(Mailing address  
MAY BE A POST OFFICE BOX)

FILED  
FEB - 3  
AM 10:51  
TALLAHASSEE, FL

2. The Florida document number of this limited liability company is: M14000005808

3. Jurisdiction of its organization: DELAWARE

4. Date authorized to do business in Florida: 12/23/2013

**SECTION II (5-9 complete only the applicable changes)**

5. New name of the limited liability company: CROSS CITY FOREST MANAGEMENT LLC  
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

*Enter Florida Street Address*

\_\_\_\_\_, Florida \_\_\_\_\_  
City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

*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.*

\_\_\_\_\_  
If Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

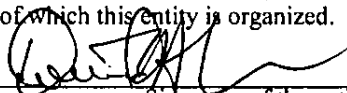
\_\_\_\_\_

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

\_\_\_\_\_

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

  
\_\_\_\_\_  
Signature of the authorized representative

DAVID P. HOFFER  
\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee: \$25.00**

2017 FEB -3 AM 10:51  
FEB 3 2017  
AM 10:51

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "CROSS CITY FOREST PRODUCTS LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "CROSS CITY FOREST MANAGEMENT LLC" ON THE SIXTH DAY OF JANUARY, A.D. 2017, AT 11:18 O`CLOCK A.M.

2017 FEB -3 AM 10:52  
CORP. SEC. DIV.  
DELAWARE



  
Jeffrey W. Bullock, Secretary of State

5454767 8320  
SR# 20170540552

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 201957308  
Date: 01-31-17

State of Delaware  
Secretary of State  
Division of Corporations  
Delivered 11:18 AM 01/06/2017  
FILED 11:18 AM 01/06/2017  
SR 20170088200 - File Number 5454767

## STATE OF DELAWARE CERTIFICATE OF AMENDMENT

1. Name of Limited Liability Company: CROSS CITY FOREST PRODUCTS LLC
2. The Certificate of Formation of the limited liability company is hereby amended as follows:

CROSS CITY FOREST MANAGEMENT LLC

IN WITNESS WHEREOF, the undersigned have executed this Certificate on  
the 6TH day of JANUARY, A.D. 2017.

By: 

Authorized Person(s)

Name: DAVID P HOFFER

Print or Type

2017 FEB -3 AM 10:52