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OCT 10 2014 J. HARRIS

COVER LETTER

TO:

Registration Section

Division of Corporations
SUBJECT: Perkins Paper, LLC
Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Beth Ensing
Name of Person
Gordon Food Service
Firm/Company
PO Box 2992
Address
Grand Rapids, MI 49501
City/State and Zip Code
beth.ensing@gfs.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Beth Ensing616717-4818
Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclosed is a check for the following amount: \$\Bigsize \mathbb{125.00} \mathbb{Filing Fee} \mathbb{130.00} \mathbb{Filing Fee} \mathbb{2} \mathbb{155.00} \mathbb{Filing Fee} \mathbb{2} \mathbb{155.00} \mathbb{Filing Fee} \mathbb{2} \mathbb{1560.00} \mathbb{Filing Fee}, \text{Certificate} \text{of Status} \text{Certified Copy}



September 4, 2014

BETH ENSING GORDON FOOD SERVICE PO BOX 2992 GRAND RAPIDS, MI 49501

SUBJECT: PERKINS PAPER, LLC Ref. Number: W14000054104

We have received your document for PERKINS PAPER, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Jenna D Harris Regulatory Specialist II

14 OCT -9 PH

Letter Number: 114A00018928

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:

Perkins Paper, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.")
2. Massachusetts 3.
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4 August 2014
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 1300 Gezon Pkwy SW
Wyoming, MI 49509
(Street Address of Principal Office)
6. PO Box 2992
Grand Rapids, MI 49501
(Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Daniel A. Gordon - Manager 1300 Gezon Plewy SW Wyoming MI 49 SD9
John M. Gordon, Jr Munuger Boo Greson Plany SW Wyoming MILY950
David L. Gray - Munuser 1300 Grzon Pakwy Sw Wyoming MI 49509
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)
Signature of an authorized person (In accordance with section 605.0203, F.S.), the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true, am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)
John M. Gordon, Jr.
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.

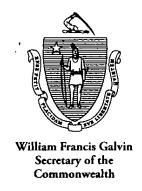
Perkins Paper, LLC				
If unavailable	, the alternate to be used in	1 the state of Florida is:		
2. The name	and the Florida street addr	ress of the registered agent and office are:		
	Corporation Service Company		1 MAN 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
		(Name)	VISIONE VISIONE	
	1201 Hays St	treet	-9 -9	
	Florida Stree	t Address (P.O. Box NOT ACCEPTABLE)	- 子 名名	
	Tallahassee	FL 32301	- 09	
		City/State/Zip	<u> </u>	

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.

(Signature)

Dawn Frantz, Asst. Secretary

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



The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02133

September 26, 2014

TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of a Limited Liability Company was filed in this office by

PERKINS PAPER, LLC

in accordance with the provisions of Massachusetts General Laws Chapter 156C on **January 25**, 2012.

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation or withdrawal; and that said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are: JOHN M. GORDON JR, DANIEL A. GORDON, DAVID LEE GRAY

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: JOHN M. GORDON JR, DANIEL A. GORDON, DAVID LEE GRAY

The names of all persons authorized to act with respect to real property listed in the most recent filing are: **JOHN M. GORDON JR**



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

lean Travino Galelin

Processed By;sam