To:

10/13/2017

**Division of Corporations** 

# Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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

Email Address:

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (512)418-6949 Fax Number : (954)208-0845

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

### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 21ST CENTURY LABELS & PECKAGING, LLC

Certificate of Status	0
Certified Copy	l
Page Count	06
Estimated Charge	\$55.00

Electronic Filing Menu — Corporate Filing Menu

Help

# **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: 21st Century Labels & Packaging, LLC	
	Limited Liability Company
Dear Sir or Madam:	
The enclosed application, certificate and fee(s) are	e submitted for filing.
Please return all correspondence concerning this n	matter to the following:
Brent Steineman	
Name of Person	
lnovar Packaging Group LLC	
Firm/Company	
10470 Miller Rd	-
Address	
Dallas, TX 75238	
City/State and Zip Code	
bsteineman@inovarpkg.com	
E-mail address: (to be used for future annual re	port notification)
For further information concerning this matter, plants	case call:
Kelly C. Morgan	at ( 216 363-4582
Name of Person	Area Code & Daytime Telephone Number
STREET/COURTER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:  [7] \$25 Filing Fee	∑S\$55 Filing Fee & ☐ \$60 Filing Fee,     Certified Copy     Certified Copy

#### 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 Dep	artment of
State: 21st Century Labels & Packaging, LLC		
Enter new principal office address, if applicable:		No Olivers for the Bull to desire the Self-Management and some over the Self-Management
(Principal office address MUST BE A STREET ADDRESS)		
Finter new mailing address, if applicable: (Mailing address		
MAY BE A POST OFFICE BOX		
2. The Florida document number of this limited lia	bility company is: M16000005159	Pio ₹
3. Jurisdiction of its organization: Delaware		
<ul> <li>Jurisdiction of its organization: Delaware</li> <li>Date authorized to do business in Floridu: 6/27</li> </ul>	/2016	36 36
SECTION II (5-9 complete only the applicable	changes)	
	-	
5. New name of the limited liability company: (mus	t contain "Limited Liability Comp	any, " "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or ma must contain "Limited Liability Company," "L.L.C	naging members adopting the alter	iness in Florida and attach a nate name. The alternate name
6. If amending the registered agent and/or registered registered agent and/or the new registered office a	ed officer address on our records, ( ddress bere:	enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida S	Street Address
		_ Florida
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	City	Zip Code
New Registered Agent's Signature, if changing Re Thereby accept the appointment as registered age the provisions of all statutes relative to the proper and accept the obligations of my position as regist document is being filed to merely reflect a change liability company has been notified in writing of the	nt and agree to act in this capacity and complete performance of my tered agent as provided for in Cha in the registered office address. I	duties, and Lam familiar with pter 605, F.S. Or, if this
- If C	Thanging Registered Agent, Signar	ure of New Registered Agent

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:					
itle/ Capacity	Name		Address	Type of Action	
		· · · · · · · · · · · · · · · · · · ·		∏Add	
				Remove	
·				Remove	
- Add office					
				Remove	
· · · · · · · · · · · · · · · · · · ·				Add	
				Remove	
. Attached is a certi	ficate, if required: n	o more than 90 da	nys old, evidencing the se official having custody of reco	FORE PER OF BOTTON OF STEELS OF STEE	
aforementioned ai	the law of which thi	s entity is organiz	e official having custody of reco	AM 9: 36	

Filing Fee: \$25.00

# Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY THAT THE SAID "21ST CENTURY LABELS &

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

NAME TO "INOVAR PACKAGING FLORIDA LLC" ON THE THIRTIETH DAY OF

MAY, A.D. 2017, AT 10:29 O'CLOCK A.M.

Authentication: 203393882

Date: 10-13-17