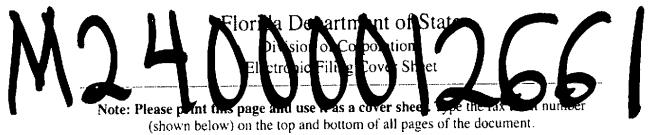
15612148442

10/2/24, 2.08 PM

Division of Corporations



(((H240003340713)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

	Doing so will generate another cover sheet.	· 202
To:	Division of Corporations Fax Number : (850)617~6383	40CT -3
From:	Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694~8107 Fax Number : (561)214~8442	PH 4: 43 OF S VATE SSEE, PL

Enter the email address for this business entity to be used for future zamunual report mailings. Enter only one email address please. 교육교 국준**E**mail Address:__

Foreign Limited Liability Company Pratt (Warner Robins Corrugating), LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

M. SOLOMON OCT - 4 2024

Electronic Filing Menu Corporate Filing Menu

Help

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	ns Corrugating), LLC In Limited Liability Company, must include "Limite	ਦੇ Liability Co	mpany,""L.L.C.," or "LLC.")			
Delaware	name adopted for the purpose of transacting business in F which foreign limited liability company is organized)		nate name must include "Limited Liabili (FEI number, i		C." or "LL	C.")
4	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determ	registration) ine penalty liabi	lityI	_		
4004 Summit Blvd 5. (Street Address of Principal Office)		6	04 Summit Blvd NE (Mailing Address)	 그런 고:오	2024 OCT	
Ste 1000		St	e 1000	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	0CT -¦3	Berran marited Extra
Atlanta, GA 30319		Al	lanta, GA 30319	55 E		
7. Name and street addre	ess of Florida registered agent: (P.O. Box	NOT acce	eptable)	STATE	PM 4: 43	
Name:	Corporate Creations Network Inc.					
Office Address:	801 US Highway 1		_			
	North Palm Beach		33408 Florida			
	(c ny)		tante code			

Registered agent's acceptance:

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 application, 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.

Patricia Giner	Patricia Giner Special Secretary		
(Registered agent's signature)			

15612148442

manage [up to six (ing purp 6) total]:	poses, list names, title or capacity and	addresses of the primary members	s/managers or persons authorized to
Title or Capacity:		Name and Address:	Title or Capacity:	Name and Address:
[]Manages		Pratt Corrugated Holdings, Inc.		C

_		Title of Cabaci	Name and Address:
□Manager	Name: Pratt Corrugated Holdings, Inc.	Manager	Name: Gary Byrd
■Member	Address: 4004 Summit Blvd NE	□Member	Address: 4004 Summit Blvd NE
□Authorized	Ste 1000	□Authorized	Ste 1000
Person	Atlanta, GA 30319	Person	Atlanta, GA 30319
Other		□Other	□Other
≣Manager	Name: Anthony Pratt	■Manager	Name: Douglas R. Balyeat
□Метber	Address: 4004 Summit Blvd NE	□Member	Address: 4004 Summit Blvd NE
□Authorized	Ste 1000	□Authorized	
Person	Atlanta, GA 30319	Person	Atlanta, GA 30319 71 ()
Other	 _	□Other	
□Manager	Name		
□Member	Name:	□Manager	Name:
□Authorized		☐ Member ☐ Authorized	Address:
Person		Person	
Other	Other	□Other	□Other

Important Notice; Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

- 9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)
- 10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I 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.

Signature of an authorized person Douglas R. Balyeat, Manager Typed or printed name of signee

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "PRATT (WARNER ROBINS CORRUGATING),

LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS

IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF

THIS OFFICE SHOW, AS OF THE SECOND DAY OF OCTOBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PRATT (WARNER ROBINS CORRUGATING), LLC" WAS FORMED ON THE THIRTY-FIRST DAY OF MARCH, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

Authentication: 204540574

Date: 10-02-24