Entry Name ACKAGING SERVICE INDUSTRIES, LLC  Incipal Place of Business Maining Address IOU WEST MARKET STREET UDUS/ULE KY 4020  Principal Place of Business  A Mailing Address 12243 Branford Street UDUS/ULE KY 4020  Principal Place of Business  A Mailing Address  12243 Branford Street UDUS/ULE KY 4020  City & State  City & State  City & State  City & State  Contry  Country  Coun
100 WEST MARKET STREET       1100 WEST MARKET STREET         OUISVILLE KY 40201       LOUISVILLE KY 40201         Principal Place of Business       3. Mailing Address         12243 Branford Street       DO NOT WRITE IN THIS SPACE         Suite, Apt. #, etc.       Suite, Apt. #, etc.         City & State       City & State         Suite, Apt. #, etc.       Suite, Apt. #, etc.         City & State       Curry         Zip       Country         Country       Scritticate of Status Desired         G. Name and Address of Current Registered Agent       Name         CORPORATION SERVICE COMPANY       Street Address (PO, Box Number is Not Acceptable)         2101 HAYS STREET       TalLaHASSEE FL 32301-2525         City       FL         City       FL         Street Address (PO, Box Number is Not Acceptable)         City       FL         Zip Code       City         The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.         IMANAGINO MEMBERS/MEMBERS       IO         Make Check Payable to Department of State
DUISVILE KY 40201  Principal Place of Business  Principal Place of Business  2243 Bran Ford Street  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  City & State  Country  Zip  Country  Zip  Country  S. Certificate of Status Desired  F. Name and Address of Current Registered Agent  Name  CORPORATION SERVICE COMPANY  1201 HAYS STREET  TALLAHASSEE FL 32301-2525  City  MANAGING MEMBERS/MEMBERS  Net  Marke Check Payable to Department of State  MANAGING MEMBERS/MEMBERS  Net  Marke Check Payable to Department of State  MANAGING MEMBERS/MEMBERS  Net  Marke Check Payable to Department of State  MANAGING MEMBERS/MEMBERS  Net  Marke Street Address  City Street Address  Dot Change Addition  Contry  City  City City
Suite, Apt. #, etc.       I2243 Branford Street       DO NOT WRITE IN THIS SPACE         Suite, Apt. #, etc.       Suite, Apt. #, etc.       DO NOT WRITE IN THIS SPACE         City & State       City & State       Applied For         Zip       Country       Zip       Country       Science         6. Name and Address of Current Registered Agent       7. Name and Address of New Registered Agent       Fee Required         6. Name and Address of Current Registered Agent       7. Name and Address of New Registered Agent       Name         CORPORATION SERVICE COMPANY       Street Address (P.O. Box Number is Not Acceptable)       City & Country       Street Address (P.O. Box Number is Not Acceptable)         1201 HAYS STREET       TALLAHASSEE FL 32301-2525       City       FL       Zip Code         The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.       GNATURE       Signature, typed or printed name of registered agent and the if applicable       PACE Registered Agent agentame registered agent and the if applicable       DATE         Make Check Payable to Department of State       Make Check Payable to Department of State       DATE       Change       Addition         Make Check May Delta       TILE       MANAGING SERVICE CORPORATION       Delete       TILE       Make       Change       Addition      <
Suite, Apt. #, etc.       12243 Branford Street       DO NOT WRITE IN THIS SPACE         Suite, Apt. #, etc.       Suite, Apt. #, etc.       DO NOT WRITE IN THIS SPACE         City & State       City & State       Applied For Suite, Apt. #, etc.       Applied For Suite, Apt. #, etc.         Zip       Country       Zip       Country       S. Certificate of Status Desired       Applied For Not Applicable         6. Name and Address of Current Registered Agent       Name       7. Name and Address of New Registered Agent       Name         CORPORATION SERVICE COMPANY       Street Address (PO. Box Number is Not Acceptable)       Street Address (PO. Box Number is Not Acceptable)       Country         1201 HAYS STREET       TALLAHASSEE FL 32301-2525       City       FL       Zip Code         The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fiorida.       City Code         GNATURE       Signature, typed or printed name of registered agent and the registered Agent agentative required when randating)       DME         Make Check Payable to Department of State       Intel Registered Agent agentative required when randating)       DME         Make Check Payable to Department of State       Intel Registered Agent agentative required when randating)       DME         Make Check Payable to Department of State       Intel Registered Agent agentative required w
Sun Valley, Ca 91352       95-4716163       Not Applicable         Zip       Country       Zip       Country       5. Certificate of Status Desired       \$5.00 Additional         6. Name and Address of Current Registered Agent       7. Name and Address of New Registered Agent       Name         CORPORATION SERVICE COMPANY         1201 HAYS STREET       Name       Street Address (P.O. Box Number is Not Acceptable)         1201 HAYS STREET       City       FL       Zip Code         TALLAHASSEE FL 32301-2525         City       FL       Zip Code         Ginature, speed or perinder name of registered agent and title if applicable         IPLE NOW/III:FEE.IS.\$50.00         MARM PACKAGING SERVICE CORPORATION         ITHE         MARM PACKAGING SERVICE CORPORATION         ITHE         MGRM       Delete         ITHE         MGRM         PACKAGING SERVICE CORPORATION         ITHE         MGRM       Change       Addition         ITHE         PACKAGING SERVICE CORPORATION         ITHE       Addition <t< td=""></t<>
Zip       Country       Zip       Country       S. Certificate of Status Desired       \$5.00 Additional Fee Required         6. Name and Address of Current Registered Agent       7. Name and Address of New Registered Agent       7. Name and Address of New Registered Agent         CORPORATION SERVICE COMPANY       Street Address (P.O. Box Number is Not Acceptable)       Street Address (P.O. Box Number is Not Acceptable)         1201 HAYS STREET       TALLAHASSEE FL 32301-2525       City       FL       Zip Code         The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.       GNATURE       City       FL       Zip Code         IGNATURE       Signature, typed or privide name of registered agent and title of explicitable       (NOTE: Registured Agent signature required when reinstaing)       DATE         IGNATURE       Make Check Payable to Department of State       DATE       FILE:NOW!!!!FEE.IS.\$50.00.       FILE:NOW!!!!FEE.IS.\$50.00.         IMARE ADDRESS       10.       ADDITIONS/CHANGES       Change       Addition         IVE       MGRM       Delete       TILE       NAME       Change       Addition         IV: 57-ZiP       ID OUISYLLE KY 40201       Delete       TILE       NAME       Change       Addition         MME       DLOUISYLLE KY 40201       Delete
6. Name and Address of Current Registered Agent       7. Name and Address of New Registered Agent         6. Name and Address of Current Registered Agent       7. Name and Address of New Registered Agent         CORPORATION SERVICE COMPANY       Street Address (P.O. Box Number is Not Acceptable)         1201 HAYS STREET       Street Address (P.O. Box Number is Not Acceptable)         I201 HAYS STREET       City         TALLAHASSEE FL 32301-2525       City         City       FL         Zip Code       City         The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.         IGNATURE       Signature, typed or printed name of registered agent and title if applicable         ID01 HELE-NOW!!!!.FEE.IS.\$50.00
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525       Street Address (P.O. Box Number is Not Acceptable)         City       FL       Zip Code         The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.       City       FL         IGNATURE       Signature, typed or printed name of registered agent and the if explicable       (NOTE Registered Agent signature required when reinstating)       DATE         IGNATURE       Make Check Payable to Department of State       MANAGING MEMBERS / MEMBERS       10.       ADDITIONS/CHANGES         ILE       MGRM ME       PACKAGING SERVICE CORPORATION 1100 WEST MARKET STREET LOUISVILLE KY 40201       ITTLE       MAME         ILE       P       Delete       TITLE       Change       Addition         INME       Differ Address       Change       Addition
1201 HAYS STREET       Street Address (F.O. BOX Number is Not Acceptable)         1201 HAYS STREET       City       FL       Zip Code         GNATURE       Signature, typed or printed name of registered agent and tite if applicable       (NOTE: Registered Agent signature required when reinstaing)       DATE         Make Check Payable to Department of State       Make Check Payable to Department of State       Change       Addition         Make Addition MARKET STREET       Int Le       Street Addition       Street Additite Additite Addition       Change
TALLAHASSEE FL 32301-2525         City       FL       Zip Code         Ginature, typed or printed name of registered agent and title if applicable       (NOTE: Registered Agent signature required when reinstaining)       DATE         Make Check Payable to Department of State         Make Check Payable to Department of State         Intel MGRM       Intel ADDITIONS/CHANGES         Intel MARGING SERVICE CORPORATION       NAME         Intel MARKET STREET       Intel ADDIESE         Intel ADDIESE       Intel Addition         MARKET STREET       Intel Addition         Intel MARKET STREET       Intel ADDIESE         Intel Addition       Intel Additio
City       FL       Zip Code         In the above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.       Interview of Florida.         IGNATURE       Signature, typed or printed name of registered agent and title if explicable       (NOTE Registered Agent signature required when reinstaling)       DATE         IGNATURE       Signature, typed or printed name of registered agent and title if explicable       (NOTE Registered Agent signature required when reinstaling)       DATE         IGNATURE       Interview of the purpose of printed name of registered agent and title if explicable       (NOTE Registered Agent signature required when reinstaling)       DATE         IGNATURE       Interview of printed name of registered agent and title if explicable       (NOTE Registered Agent signature required when reinstaling)       DATE         Interview of printed name of registered agent and title if explicable       (NOTE Registered Agent signature required when reinstaling)       DATE         Interview of printed name of registered agent and title if explicable       (NOTE Registered Agent signature required when reinstaling)       DATE         Interview of printed name of registered agent and title if explicable       Interview of printed name of registered agent and title if explicable       Interview of printed name of registered agent and title if explicable         Interview of printed name of registered agent and title if explicable       Interview of printed name of re
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fiorida.  IGNATURE  Signature, typed or printed name of registered agent and the if applicable  INOTE: Registered Agent signature required when reinstating)  DATE  FILE:NOW.111=FEE.IS_\$50.00  Make Check Payable to Department of State  MANAGING MEMBERS/MEMBERS  IO  ADDITIONS/CHANGES  IO  Change Addition  NAME  NAME  NAME  NAME  D.R. Thacker  REETADDRESS  ID  Delete  NAME  STREET ADDRESS  ID  Change Addition  NAME  STREET ADDRESS  ID  Change Addition  NAME  STREET ADDRESS  ID  Change Addition  Change Addition  STREET ADDRESS  ID  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition  STREET ADDRESS  ID  Change Addition  Change
Signature, typed or printed name of registered agent and title if applicable.       (NOTE: Registered Agent signature required when reinstating)       DATE         FILE:NOW:11:FEE.IS.\$50.00.         Make Check Payable to Department of State         MANAGING MEMBERS/MEMBERS       10.       ADDITIONS/CHANGES         ILE       MGRM       Delete       TiTLE       Change       Addition         MKE       PACKAGING SERVICE CORPORATION       NAME       STREET ADDRESS       CITY-ST-ZIP       Change       Addition         ILE       P       Delete       TiTLE       Change       Addition
Signature, typed or printed name of registered agent and title if epplicable.       (NOTE: Registered Agent signature required when reinstating)       DATE         FILE:NOW:!!!_FEE.IS.\$50.00
Make Check Payable to Department of State         Make Packaging SERVICE CORPORATION         NAME         PACKAGING SERVICE CORPORATION       NAME         Street Address       Street Address         Dublet       Title         Delete       Title
MANAGING MEMBERS/MEMBERS       10.       ADDITIONS/CHANGES         ILE       MGRM       Delete       TITLE         PACKAGING SERVICE CORPORATION       NAME       Change       Addition         I100 WEST MARKET STREET       STREET ADDRESS       CITY-ST-ZIP       Change       Addition         ILE       P       Delete       TITLE       Change       Addition         INE       D.R. Thacker       NAME       2UUUU4423952-4       4         REET ADDRESS       1100       West       STREET ADDRESS       -UG/19/0101071021
ME       MGRM       Delete       TITLE       Change       Addition         MME       PACKAGING SERVICE CORPORATION       NAME       NAME       STREET ADDRESS       City-st-ZiP       City-st-ZiP       City-st-ZiP       Change       Addition         ILE       P       Delete       TiTLE       Change       Addition         ILE       P       Delete       TiTLE       Change       Addition         ILE       P       Delete       TiTLE       Change       Addition         INE       D.R. Thacker       NAME       200004423952-4       Addition         REET ADDRESS       1100 West Market Street       STREET ADDRESS       -U6/19/01-01071-021
MARE     PACKAGING SERVICE CORPORATION     NAME       REET ADDRESS     1100 WEST MARKET STREET     STREET ADDRESS       LOUISVILLE KY 40201     CITY-ST-ZIP       ILE     P     Delete       INME     D.R. Thacker     ITLE       REET ADDRESS     1100 West Market Street     STREET ADDRESS       ILE     P     Delete       INME     D.R. Thacker     NAME       REET ADDRESS     1100 West Market Street     STREET ADDRESS
REET ADDRESS LOUISVILLE KY 40201     STREET ADDRESS CITY-ST-ZIP       ILE     P       D.R. Thacker     Delete       IREET ADDRESS     1300. West Market Street
Delete       TITLE       Change       Addition         MME       D.R. Thacker       NAME       2000044299624         REET ADDRESS       1300 West Market Street       STREET ADDRESS       -06/19/0101071021
ME D.R. Thacker NAME 200044299624 Il00 West Market Street Street Street Street Street D.R. Thacker -06/19/0101071021
1100 West Market Street
Y-ST-ZP - Touisville Ky 40201 - CITY-ST-ZP
REETADDRESS 12212 DIVISION STREETADDRESS
T-SI-2P         Sun Valley Ca 91352         CIT-SI-2P         #######3.00
CFO     Delete     TITLE     Change     Addition       ME     Thian C. Cheong     NAME
REET ADDRESS 12243 Branford Street
Sun Valley CA 91352     Clif-Si-2P       TE 3     ASTR     Delete       TILE     Change     Addition
Me Peter Gamboa
TV ST 7/2 12243 Branford Street
LE Delete TITLE Change Addition
ME NAME
REET ADDRESS ) TY-ST-ZIP CITY-ST-ZIP