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TALLAMASSES STATE





ACCOUNT NO. : 072100000032

REFERENCE: 144922

7305480

AUTHORIZATION : 1716

COST LIMIT : \$ 25.00 .

ORDER DATE : January 14, 2005

ORDER TIME : 10:07 AM

ORDER NO. : 144922-060

CUSTOMER NO: 7305480

CUSTOMER: Donna M. Hill

Sca Americas Inc. 500 Baldwin Tower

Eddystone, PA 19022

CHANGE OF AGENT

NAME: SCA TISSUE NORTH AMERICA, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

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1. The name of the limited liability company is: SCA TISSUE NORTH AMERICA, LLC
2. The mailing address of the limited liability company is:
500 Baldwin Tower, Eddystone, PA 19022
Jov Buldwin Towel, Eddyscone, PA 19022
October 04, 1999 M99000001575
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
United Corporate Services, Inc.
Name
9200 S. Dadeland Boulevard, Suite 508
Address
9200 S. Dadeland Boulevard, Suite 508 Address Miami, FL 33156 City, State and Zip
City, State and Zip
6. The name and address of the new registered agent and/or office: Corporation Service Company Corporation Service Company
Corporation Service Company
Name Name
1201 Hays Street
Florida street address (P.O. Box NOT acceptable)
- 11 1 TW - 2224
Tallahassee FL 32301 City, State and Zip
City, State and Zip
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. (Signature of a member of authorized representative of a member)
Maureen_Cullen
(Printed or typed name of signee)
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 608, 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.
Naralleline M. Culler
(Signature of Registered Agent) Jacqueline M. Giles, Asst. Vice President

FILING FEE: \$25.00

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

INHS18(10/99)