Florida Department of State **Division of Corporations** Public Access System

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To: Division of Corporations Fax Number : (850)205-0380 From: Account Name : HOLLAND & KNIGHT Account Number : 075350000340 : (407)425-8500 Phone Fax Number : (407)244-5288 N 58 IN ISION OF CORPORATION **REGISTERED AGENT CHANGE** يوي: UNICELL PAPER MILLS, INC.

| Certificate of Status | 0 |
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Corporate Filing

Public Access Help

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| FROM: | HOLLAND AN | ID KNIGHT | FRX NO.: | 4872445288 | 07-85-84 | 01:36P | P.82 |
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| | STAT | ement of Ch | | ERED OFFICE OR I | REGISTERED AGENT OR | вотн | |
| | statemen | t of change is sub | mitted for a corporatio | n org <i>on</i> ized under the l | 617.1508, Florida Statutes, thi laws of the State of Florida with, in the State of Florida. | | |
| | I. The na | une of the corpora | tion: Unicell Paper Mil | lls, Inc. | | | |

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| 2. The princ | ipal office address: 3401 JOHNS | PARKWAY SANFORD FL 32771 | |
|--------------------------------|---|---|---|
| | | | |
| 3. The maili | ng address (if different): | | |
| | | | The second s |
| 4. Date of in | corporation/qualification: 07/02/1 | 999 Document number: P99000060037 | |
| | and street address of the current r epertment of State. | egistered agent and registered office on file with the | |
| | Girish Sharma | <u> </u> | ـــــــــــــــــــــــــــــــــــــ |
| | 1774 BRIDGEWATER DRIV | E HEATHROW FL 32746 | |
| | | | -11 |
| | | | |
| | = | stered agent (if changed) and /or registered office | Ш Г |
| (if changes | u). | E of PH | .0 |
| | Intrastate Registered Agent | | £., |
| | 200 S. Orange Avenue, Suit | 2600 BAR 10 10 10 10 10 10 10 10 10 10 10 10 10 | , 5 4.1 |
| | (P.O. Box N | OT acceptable) | |
| | Orlando, FL 32801 | and a standard with the standard standard standard standard standard standard standard standard standard standa | tion and the state of the stat |
| The street ad as changed v | dress of its registered office and vill be identical. | the street address of the business office of its registered agent, | |
| Such change authorized b | was authorized by resolution du y the board, or the corporation h | ily adopted by its board of directors or by an officer so as been notified in writing of the change. | |
| /s/ Bri | t Sharma | Brig Sharma, Senior Vice President | |
| | mature of an officer or director) | (Printed or typed name and fitte) | |
| I hereby acce I further agr | ept the appointment as registered ee to comply with the provisions | d agent und agree to act in this capacity. of all statutes relative to the proper and complete performance - | |

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, Thereby confirm that the corporation has been notified in writing of this change.

| /s/ (:1enn_Adams_ (Signature of Registered Agent) | | | ع: 1977 € فرق : 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 |
|--|---|---------|---|
| If signing on behalf of an entity: | | | |
| Glenn Adams. Vice President (Typed of Printed Name) | <u>a a a an a</u> | <u></u> | الله المتر ين الين. |
| | * * * FILING FEE: \$35.00 * * * | | |

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314