



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
11/24/2004	200432900264	FOREIGN/AMENDMENT (FAM)	50.00	100.00	.00	.00	.00

Receipt

This is not a bill. Please do not remit payment.

C.T. CORPORATION SYSTEM
17 S. HIGH STREET
COLUMBUS, OH 43215

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, J. Kenneth Blackwell**333958**

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

OFFICEMAX INCORPORATED

and, that said business records show the filing and recording of:

Document(s)

FOREIGN/AMENDMENT

Document No(s):

200432900264

United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of
the Secretary of State at Columbus,
Ohio this 23rd day of November,
A.D. 2004.

J. Kenneth Blackwell
Ohio Secretary of State

11/02/2004 TUE 12:38 FAX 1 312 263 4207 CT Chicago SPT ->> Columbus, OH

002/004

Prescribed by **J. Kenneth Blackwell**

Ohio Secretary of State
 Central Ohio: (614) 466-3910
 Toll Free: 1-877-SOS-FILE (1-877-767-3453)

www.state.oh.us/sos

e-mail: busserv@sos.state.oh.us

Expedite this Form: (Select One)

Mail Form to one of the following:

☒ Yes PO Box 1390
 Columbus, OH 43216

*** Requires an additional fee of \$100 ***

☐ No PO Box 1028
 Columbus, OH 43216

CERTIFICATE OF AMENDMENT TO FOREIGN CORPORATION APPLICATION FOR LICENSE

(For Foreign, Profit or Non-Profit)

Filing Fee \$50.00

(1) ☒ Foreign for Profit License No. <u>333958</u> (179-FAM)	(2) ☐ Foreign Non-Profit License No. _____ (179-FAM)
--	---

Complete the following information in this section if box (1) or (2) is checked.

Boise Cascade Corporation

(Name of Corporation - Including Assumed Name if Applicable)

Matthew R. Broad, Secretary
 (Authorized Officer and Title)

, does hereby certify that the above named Foreign

Corporation formed in the state of Delaware

has modified the information set forth in the original Application for License or any Amendment thereto with the following:

The name of the corporation has been amended to

OfficeMax Incorporated

The corporation's principal office shall be located in

(street address)

NOTE: P.O. Box Addresses are NOT acceptable.

(city, township, or village)

(state)

(zip code)

The corporation's principal office within Ohio shall be located in ☐ Check box if there is no Ohio Location

(city, township, or village)

(county)

, Ohio

(zip code)

11/02/2004 TUE 12:38 FAX 1 312 263 4207 CT Chicago SPT ->-> Columbus, OH

003/004

Complete the following information in this section if box (1) or (2) is checked Cont.

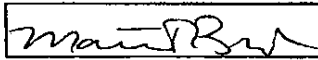
The corporation will exercise the following corporate purpose(s) in Ohio:

The corporation has currently authorized _____ shares of stock and has issued _____ shares.

This certificate of amendment supersedes the information currently on file with the Secretary of State of Ohio.

This Certificate of Amendment to the Foreign Corporation Application for License has been adopted in accordance with the laws of the state of domestication.

Must be authenticated by an
authorized representative


Authorized Representative

November 1, 2004

Date



Prescribed by **J. Kenneth Blackwell**

Ohio Secretary of State

Central Ohio: (614) 466-3910

Toll Free: 1-877-SOS-FILE (1-877-767-3453)

www.state.oh.us/sos

e-mail: busserv@sos.state.oh.us

CONSENT FOR USE OF SIMILAR NAME

(For Domestic / Foreign, Profit or Non-Profit)

Must Be Accompanied By Another Form

THE UNDERSIGNED DESIRING TO FILE A:

(CHECK ONLY ONE (1) BOX) This filing does not extend the registration period

☒ Where consenting entity is a corporation (147-CSC)	Where consenting entity is a ☐ Trade Name ☐ Service Mark ☐ Trade Mark (149-CSN)	Where consenting entity is a ☐ Limited Liability Company ☐ Limited Partnership ☐ Partnership Having Limited Liability (148-CSL)
---	--	--

☐ Check here if additional provisions are attached

Charter or Registration No.
of Entity Giving Consent

966185

Name of Entity
Giving Consent

OfficeMax Corp.

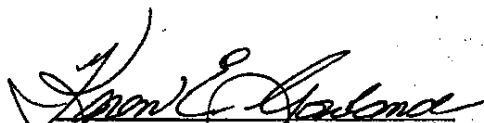
Gives Its Consent To

Boise Cascade Corporation

To Use The Name

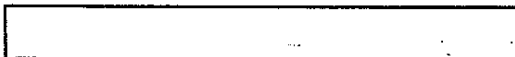
OfficeMax Incorporated

REQUIRED
Must be authenticated
(signed) by an authorized
representative


Karen E. Gowland
Assistant Secretary

11/8/04

Date



Authorized Representative



Date

If the consenting party is a partnership, all general partners must sign. If only one partner is authorized to sign, a copy of the resolution authorizing the signature must be included.