

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet**F12000004496**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000263880 3)))



H120002638803ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : CORPORATION SERVICE COMPANY
Account Number : 120000000195
Phone : (850) 521-0821
Fax Number : (850) 558-1515

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FOREIGN PROFIT/NONPROFIT CORPORATION
CHRW OLD CO, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

11/06/12

Electronic Filing Menu

Corporate Filing Menu

Help

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. CHRW Oldco, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Minnesota

(State or country under the law of which it is incorporated)

3. _____

(FBI number, if applicable)

4. December 22, 1999

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. _____

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 14701 Charlson Road, Eden Prairie, MN 55347

(Principal office address)

(Current mailing address)

8. Offer electronic management tools for efficient means of payment for transportation-related services.

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, FL

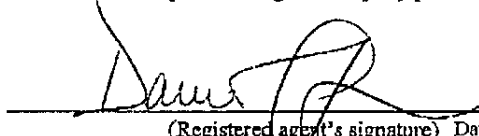
(City)

, Florida 32301

(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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.



(Registered agent's signature) Dawn Frantz, Asst. Secretary

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12 NOV -5 AM 10:48
TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Bryan Foe
 Address: 14701 Charlson Road
Eden Prairie, MN 55347

Vice Chairman: John Wichoff
 Address: 14701 Charlson Road
Eden Prairie, MN 55347

Director: Mark Walker
 Address: 14701 Charlson Road
Eden Prairie, MN 55347

Director: Chad Lindbloom
 Address: 14701 Charlson Road
Eden Prairie, MN 55347

B. OFFICERS

President: Bryan Foe
 Address: 14701 Charlson Road
Eden Prairie, MN 55347

Vice President: Bruce Larson
 Address: 14701 Charlson Road
Eden Prairie, MN 55347

Secretary: Christopher Gerst
 Address: 14701 Charlson Road, Eden Prairie, MN 55347

Treasurer: Troy Renner
 Address: 14701 Charlson Road, Eden Prairie, MN 55347

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
 Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, P.S.

14. Christopher E. Gerst, Secretary
 (Typed or printed name and capacity of person signing application)

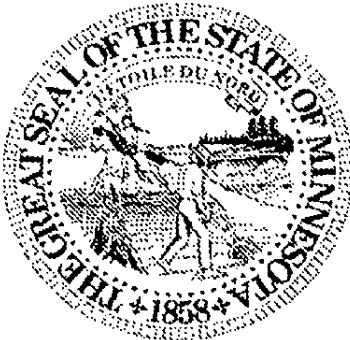
**Office of the Minnesota Secretary of State
Certificate of Good Standing**

I, Mark Ritchie, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name: CHRW Oldco, Inc.
Date Filed: 12/22/1999
File Number: 10Y-454
Minnesota Statutes, Chapter: 302A
Home Jurisdiction: Minnesota

This certificate has been issued on: 11/02/2012

12 NOV -5 AM 10:48
STATE
TALLAHASSEE, FLORIDA



Mark Ritchie

Mark Ritchie
Secretary of State
State of Minnesota