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S. ROBERTS
DEC 0 2 2021

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 274624 7394410

AUTHORIZATION: Small Roman

COST LIMIT : \$ /87\50

ORDER DATE: December 1, 2021

ORDER TIME : 9:23 AM

ORDER NO. : 274624-005

CUSTOMER NO: 7394410

FOREIGN FILINGS

NAME: TRANSPORT SAF INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX __ CERTIFIED COPY

____ PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT#

EXAMINER:

COVER LETTER

TO:	Registration Sect Division of Corp					
SHR.	JECT:	Тга	nsport SAF I	nc.		
COD		Name of	corporation	- mu	ist include suffix	
Dear S	Sir or Madam:					
"Certi		" or "Certificate o	f Good Stan	ding	and check are subm	Business in Florida," itted to register the
Please	return all correspo	ndence concerning	g this matter	to th	e following:	
			Jeffrey S. M	ionro	e	
			Name of	Perso	on	
			TFI Internat	ional	Inc.	
			Firm/Con	pany	,	
			4701 E. 32r	d Str	eet	
			Addre	ess		
			Joplin, MC	6480)4	
			City/State a	nd Z	p code	
			jmonroe@t			
		E-mail address:	(to be used t	for fu	ture annual report no	tification)
For fu	rther information c	oncerning this ma	tter, please o	all:		
	Jeffrey S. Monroe	а	t (١	659-5021	
	Name of Person		Area Cod	′ _ e	Daytime Telepho	one Number
	STREET/COUF Registration Sect Division of Corp The Centre of Ta 2415 N. Monroe Tallahassee, FL	orations llahassee Street, Suite 810	:		MAILING AD Registration Sec Division of Cor P.O. Box 6327 Tallahassee, FL	DRESS: ction porations
Please	sed is a check for the make check payable 0.00 Filing Fee		PARTMENT Fee & E] \$78	STATE 3.75 Filing Fee & rtified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

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.

	•	·	name adopted for the purpose of transacting business in Florida)	_	
2.		Canada	398-0083027 (FEI number, if applicable)	-	
4.		lay 30, 1994	5. (Date of duration, if other than perpetual)	_	
	(Date		(Date of duration, if other than perpetual)		
i.		n/a		_	
			ness in Florida, if prior to registration) 607.1502, F.S., to determine penalty liability)		
,	1311 West 15th Street, Riviera Beach, FL 33404 ATTN: Jean-Sebastien Part				
•		(Principa	al office street address)	-	
			same		
•		(Current 1	mailing address, if different)	•	
3.	Name and stree	et address of Florida registered agent:	(P.O. Box NOT acceptable)		
	Name:	Corporation Service Company	₩ ² 1 >	E *5	
Οf	fice Address:	1201 Hays Street		ر میرسد ارسیسیا ارسیسیا	
		Tallahassee	$\frac{1}{\text{(Zip code)}}, \text{Florida} \xrightarrow{32301} \frac{1}{\text{(Sip code)}} $		
		(City)	(Zip code)		

10. 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.

(Registered agent's signature)

A. DIRECTORS Josianc-M. Langlois Chantal Martel □ Chairman ☐ Chairman 8801 Trans-Canada Highway 8801 Trans-Canada Highway □Vice Chairman Address: ☐ Vice Chairman Address: Suite 500 Suite 500 **■** Director **■** Director Saint-Laurent, Quebec H4S 1Z6 Saint-Laurent, Quebee H4S 1Z6 □ President □President **■** Vice President ■ Vice President **■** Secretary □Treasurer □ Secretary □Treasurer □Other _____ Other _____ □Other _____ Other ____ Martin Quesnel □ Chairman □ Chairman Name: Name: 8801 Trans-Canada Highway □ Vice Chairman □Vice Chairman Address: _____ Address: Suite 500 Director Director Saint-Laurent, Quebec H4S 1Z6 President ☐ President □ Vice President □ Vice President ☐Secretary **■**Treasurer ☐Sccretary □Treasurer Other____ Other ____ Other _____ Other _____ □Chairman Chairman Name: Name: _____ Address: _____ □ Vice Chairman Address: _____ □Vice Chairman Director □ Director □President □ President □Vice President □Vice President ____ ☐Secretary □Treasurer □Secretary ☐ Treasurer □Other _____ □Other _____ □Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. Signifure of Director or Officer The officer or director signing this document (and who is listed in number 11 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 5.817.155, F.S. Josiane-M. Langlois, Director, Vice President and Secretary (Typed or printed name and capacity of person signing application)

Certificate of Existence

Certificat d'existence

Canada Business Corporations Act s. 263.1(1)(c) Loi canadienne sur les sociétés par actions art. 263.1(1)

Transport SAF Inc.

Corporate name / Dénomination sociale

1116178-4

I HEREBY CERTIFY that the corporation named above was in existence under the *Canada Business Corporations Act* on 2021-11-30 (YYYY-MM-DD).

JE CERTIFIE, par la présente, que la société ci-dessus mentionnée existait en vertu de la Loi canadienne sur les sociétés par actions le 2021-11-30 (AAAA-MM-JJ).



Corporation number / Numéro de société

Isabelle Foley

Deputy Director / Directeur adjoint

2021-11-30

Issuance date (YYYY-MM-DD)
Date d'émission (AAAA-MM-JJ)



CERTIFICATE

I, the undersigned, Josiane M. Langlois. Vice President and Secretary of Transport SAF Inc., hereby certify that I have custody of the corporate records of Transport SAF Inc. and that the attached Certificate of Existence is a true and correct copy issued by Corporations Canada on today's date.

I HAVE SIGNED in Saint-Laurent, this November 30, 2021.

Josiane M. Canglois

Vice President & Secretary

COVER LETTER

TO:	Registration Se Division of Co				
SURI	JECT:	Transpe	ort SAF Inc.		
3000		Name of cor	poration - mu	ist include suffix	
Dear S	Sir or Madam:				
"Certi	ficate of Existen	tion by Forcign Corpora ce," or "Certificate of Go gn corporation to transac	ood Standing	and check are submi-	
Please	return all corres	pondence concerning th	is matter to th	e following:	
		Jef	frey S. Monro	e	
		Ŋ	lame of Perso	on	
		TF	International	Inc.	
		F	irm/Company	,	,
		470	01 E. 32nd Str	eet	
			Address		
		Jo	plin, MO 6480)4	
		City	/State and Z	p code	· <u></u>
			onroc@tfiintl.		
		E-mail address: (to l	be used for fu	ture annual report not	ification)
For fu	rther information	concerning this matter,	please call:		
	Jeffrey S. Monro	oc at (417	659-5021	
	Name of Perso	on A	rea Code	Daytime Telephor	ne Number
	Registration So Division of Co The Centre of	rporations Tallahassee oe Street, Suite 810		MAILING ADI Registration Sect Division of Corp P.O. Box 6327 Tallahassee, FL	DRESS: tion corations
Please		the following amount: le to: FLORIDA DEPAR S78.75 Filing Fee Certificate of Stat	& □ \$78		\$87.50 Filing Fee. Certificate of Status & Certified Copy