# F23000000974

(Re	equestor's Name)
(Ac	ddress)
(Ac	ddress)
(Ci	ty/State/Zip/Phone #)
PICK-UP	MAIL MAIL
(Bo	usiness Entity Name)
(D	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
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Office Use Only



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S. FRANKLIN FEB 1 5 2023

#### **COVER LETTER**

	Registration Section Division of Corporations			
SUBJE	CT: Atlas Logistics Inc.			
SOBJE		corporation	- must include suffix	
Dear Sir	or Madam:			
"Certific		f Good Stand	Authorization to Transact Business in Flor ling" and check are submitted to register t s in Florida.	
Please re	turn all correspondence concerning	g this matter	to the following:	<i>1</i> ≥ .
James K.	McMurray			
		Name of I	Person	
Atlas Wo	orld Group, Inc.			* D
		Firm/Com	pany	Ž.
1212 Sair	nt George Rd			12.
		Addre	ss	
Evansvill	e, IN 47711			
		City/State ar	d Zip code	
tincrow@	atlasworldgroup.com			
	E-mail address: (	(to be used fo	or future annual report notification)	
For furth	er information concerning this mat	ter, please ca	all:	
Tina Crowe		812	_) 424-2222 ext. 2371#	
	Name of Person	Area Code	Daytime Telephone Number	
[ [ ]	STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Please ma	is a check for the following amounke check payable to: FLORIDA DEP 0 Filing Fee	PARTMENT Fee & 🗆 🗆	OF STATE \$78.75 Filing Fee &  Certified Copy Certified Copy Certified Co	of Status &

## 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.

(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	(FEI number, if applicable)  Perpetual  (Date of duration, if other than perpetual)  a Florida, if prior to registration)  502, F.S., to determine penalty liability)  ce street address)	
(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	(FEI number, if applicable)  Perpetual  (Date of duration, if other than perpetual)  a Florida, if prior to registration)  502, F.S., to determine penalty liability)  ce street address)	
(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15  Evansville, IN 47711  (Principal office (Current mailing)  ess of Florida registered agent: (P.C.)	n Florida, if prior to registration) 502, F.S., to determine penalty liability) ce street address) g address, if different)	
(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15  Evansville, IN 47711  (Principal office (Current mailing)  ess of Florida registered agent: (P.C.)	n Florida, if prior to registration) 502, F.S., to determine penalty liability) ce street address) g address, if different)	
(SEE SECTIONS 607.1501 & 607.15  Evansville, IN 47711  (Principal office to the second of the second	ce street address)  g address, if different)	
(SEE SECTIONS 607.1501 & 607.15  Evansville, IN 47711  (Principal office to the second of the second	ce street address)  g address, if different)	
(Principal offi Evansville, IN 47711 (Current mailin ess of Florida registered agent: (P.C	g address, if different)	
(Principal offi Evansville, IN 47711 (Current mailin ess of Florida registered agent: (P.C	g address, if different)	
(Current mailin		
ess of Florida registered agent: (P.C		
poration Service Company	). Box <u>NO 1</u> acceptable)	
l Hays Street		
ahassee		
(City)	(Zip code)	
cation, I hereby accept the appointn with the provisions of all statutes re	ce of process for the above stated corporation at th nent as registered agent and agree to act in this cap elative to the proper and complete performance of sition as registered agent.	
r co	(City)  cceptance: egistered agent and to accept servi ation, I hereby accept the appointn	

under the law of which it is incorporated.

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

<sup>11.</sup> For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS							
□Chairman	Name: John P. Griffin	□Chairman	Name: Donald R. Breivogel, Jr.				
□Vice Chairman	Address: 1212 Saint George Rd	□Vice Chairman	Address: 1212 Saint George Rd				
□Director	Evansville, IN 47711	■Director	Evansville, IN 47711				
□President		□President					
□Vice President		□Vice President					
□Secretary	□Treasurer	□Secretary	<b>■</b> Treasurer				
Other Chairman	n & CEO □Other	□Other	□Other				
□Chairman	Name: Phillip J. Wahl	□Chairman	Name: James K. McMurray				
	Address: 1212 Saint George Rd	□Vice Chairman					
□Director	Evansville, IN 47711	□Director	Address: 1212 Saint George Rd Evansville, IN 47711				
□President		□President					
□Vice President		□Vice President					
□Secretary	□Treasurer	■ Secretary	☐Treasurer 💬				
Other President	& COO	□Other	Other 5				
□Chairman	Name: Todd A. Suter	□Chairman	Name; Matt Van der Linde				
	Address: 1212 Saint George Rd	□Vice Chairman	1212 Saint Goorge Rd				
□Director	Evansville, IN 47711	□Director	Evansville, IN 47711				
□President		□President					
□Vice President		□Vice President					
□ Secretary	□Treasurer	□ Secretary	□Treasurer				
Other Assistant	Secretary	■Other SVP, Bt	S. Dev. □Other □				
individuals may be	Use an attachment to report more than six (6). The atta- paded to the index when filing your Florida Departme	chment will be image	mart farm				
12.	James Z. Mille						
12. Signature of Director or Officer  The officer or director signing this document (and who is listed to number 11 who we) affirms that the facts stated barsin are true and that he are							
The officer or director signing this document (and who is listed in number 11 above) aftirms 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							

(Typed or printed name and capacity of person signing application)

s.817.155, F.S.

James K. McMurray, Secretary

#### ATTACHMENT TO

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

#### ATLAS LOGISTICS INC. (Indiana Corporation) Date Incorporated: 12/11/1995

Subsidiary of Atlas Van Lines, Inc. (EIN #35-1994501)

#### Officers:

John P. Griffin—Chairman and Chief Executive Officer
Phillip J. Wahl—President and Chief Operating Officer
Donald R. Breivogel, Jr.—Treasurer
James K. McMurray—Secretary
Todd A. Suter—Assistant Secretary
Matt Van der Linde—Senior Vice President, Business Development
Stacie Banks—Senior Vice President
Greg Williams—Assistant Secretary
Amanda Edge—Assistant Secretary

#### Director:

Donald R. Breivogel, Jr.

# State of Indiana Office of the Secretary of State

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, DIEGO MORALES, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

#### ATLAS LOGISTICS INC.

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on December 11, 1995, and was in existence or authorized to transact business in the State of Indiana on January 11, 2023.

I further certify this Domestic For-Profit Corporation has filed its most recent report required by: Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place. All fees, taxes, interest, and penalties owed to Indiana by the domestic or foreign entity and collected by the Secretary of State have been paid.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, January 11, 2023

Diego Morales

DIEGO MORALES

DIEGO MORALES
SECRETARY OF STATE

1995121158 / 20232963219

All certificates should be validated here: https://bsd.sos.in.gov/ValidateCertificate

Expires on February 10, 2023.



February 2, 2023

JAMES K MCMURRAY 1212 SAINT GEORGE RD EVANSVILLE, IN 47711 US

SUBJECT: ATLAS LOGISTICS INC.

Ref. Number: W23000014365

We have received your document for ATLAS LOGISTICS INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Sharon D Franklin Regulatory Specialist II

Letter Number: 323A00002593

