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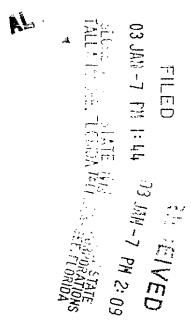
| (Re | equestor's Name) | | | | |
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| (Address) | | | | | |
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| (Cit | ty/State/Zip/Phon | e #) | | | |
| PICK-UP | WAIT | MAIL | | | |
| (Bu | siness Entity Nar | me) | | | |
| (Document Number) | | | | | |
| Certified Copies | _ Certificates | s of Status | | | |
| Special Instructions to | Filing Officer: | | | | |
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Office Use Only



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CT CORPORATION

January 7, 2003

Secretary of State, Florida 409 East Gaines Street Tallahassee FL 32399

Re: Order #: 5719928 WO

Customer Reference 1: None Customer Reference 2: None

Dear Secretary of State, Florida:

Please file the attached:

Loram Rail Services, LLC (DE) Registration Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Jeffrey J Netherton Sr. Fulfillment Specialist Jeff_Netherton@cch-lis.com

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615



APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| 1. | Lorun Rail Services LLC | |
|------|--|-------|
| | (Name of foreign limited liability company) | - |
| 2 | Delaware 3, 04-3724911 | |
| | (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) | - |
| 4 | 01/01/2003 5 Perpetual | |
| | (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") | • |
| 6. | 01/01/2003 | |
| | (Date first transacted business in Florida. (See sections 608,501, 608,502, and 817,155, F.S.) | |
| 7. | 3900 Arrowhead Drive, P.O. Box 188, Hamel, MN 55340 | |
| | | - |
| | (Street address of principal office) | |
| | (Sueet address of principal office) | |
| 8, | If limited liability company is a manager-managed company, check here | ΕD |
| _ | | |
| 9. | The usual business addresses of the managing members or managers are as follows: | |
| | Donald D. Cherrey, 3900 Arrowhead Drive, P.O. Box 188, Hamel, MN 55340 | |
| | Paul V. Wilson | • |
| | 3900 Arrowhead Drive, P.O. Box 188, Hamel, MN 55340 | |
| | | |
| | | |
| | | |
| | | |
| 10, | Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of re- | omk i |
| the | jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a | |
| trai | relation of the certificate under oath of the translator must be submitted.) | |
| 11. | . Nature of business or purposes to be conducted or promoted in Florida: | |
| | Railway Maintenance Services | , |
| | | |
| | _ O.O. Columb | |
| | Signature of a member or an authorized representative of a member. | |
| | (In accordance with acction 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) | |
| | Donald D. Cherrey | |
| | Typed or printed name of signee | |

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

| 1. The n | ame of the Limited Liabil | ity Company is: | |
|----------|----------------------------|--|----------|
| Loram Ra | il Services LLC | | - |
| 2. The n | ame and the Florida street | address of the registered agent and office a | ire: |
| | CT Companies Eugen | ••• | |
| | C T Corporation Syste | (Name) | |
| | | (Idultie) | |
| | c/o C T Corporation S | ystem, 1200 South Pine Island Road | 03 JAN - |
| | Florida | street address (P.O. Box NOT ACCEPTABLE) | |
| | | | M4 R E |
| | Blancesian | 10x 22204 | 二, 二 |

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

City/State/Zip

CT Corporation System

Lauren Greco

Assistant Secretary

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)