

M 04000003807

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

(((H09000259189 3)))



H090002591893ARCA

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) 617-6383

From: Account Name : C T CORPORATION SYSTEM
 Account Number : FCA000000023
 Phone : (850) 222-1092
 Fax Number : (850) 878-5368

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 DEC 16 AM 8:25

FILED

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

Email Address: matt@havigroup.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
HFS NORTH AMERICA LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

RECEIVED

09 DEC 16 AM 11:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

DEC 17 2009

EXAMINER

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

SECTION I (1-3 must be completed)

1. Name of limited liability company as it appears on the records of the Florida Department of State: HFS North America LLC
2. Jurisdiction of its organization: Delaware
3. Date authorized to do business in Florida: 09/15/2004

SECTION II (4-7 complete only the applicable changes)

4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? 12/15/2009
5. New name of the limited liability company: HAVI Logistics North America LLC
(must end with "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." or "LLC.")

6. If the amendment changes the period of duration, indicate new period of duration:

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment corrects any false statement, indicate the statement being corrected and the correction:

9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.


Signature of a member or the authorized representative of a member

Steven D. Romberg
Typed or printed name of signer

Filing Fee: \$25.00

FILED
09 DEC 16 AM 8:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "HFS NORTH AMERICA LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "HAVI LOGISTICS NORTH AMERICA LLC", THE FIFTEENTH DAY OF DECEMBER, A.D. 2009, AT 11:01 O'CLOCK A.M.

FILED
09 DEC 16 AM 8:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3392806 8320

091099784

You may verify this certificate online
at corp.delaware.gov/authvar.shtml




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 7699331

DATE: 12-15-09