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| (Requestor's Name) | | | | | |
|---|----------------|-----------|--|--|--|
| (Address) | | | | | |
| (Address) | | | | | |
| (City/State/Zip/Phone #) | | | | | |
| PICK-UP | | MAIL | | | |
| (Business Entity Name) | | | | | |
| (Document Number) | | | | | |
| Certified Copies | _ Certificates | of Status | | | |
| Special Instructions to Filing Officer: | | | | | |
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CORPORATION SERVICE COMPANY'

ACCOUNT NO. : 072100000032 _

REFERENCE : 976104 4379493

AUTHORIZATION :

\$ 125.00

COST LIMIT : ______

- ORDER DATE : November 16, 2004
- ORDER TIME : 11:50 AM
- ORDER NO. : 976104-050
- CUSTOMER NO: 4379493
- CUSTOMER: Ms. Carol Wilson Cnf Inc. 3240 Hillview Avenue

Palo Alto, CA 94304

_____ _ _ _ _ _ _ _ _ _ _ _ _ _

FOREIGN FILINGS

NAME: CON-WAY TRUCKLOAD SERVICES, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX ___ PLAIN STAMPED COPY

CONTACT PERSON: Amanda Haddan -- EXT# 2955

EXAMINER:

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

| IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO RECEIPTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: | | | | | | |
|---|---|-----|---|--|--|--|
| 1. | Con-Way Truckload Services, LLC | | FOR T | | | |
| | (Name of Foreign Limited Liability Company) | | | | | |
| 20. | (Jurisdiction under the law of which foreign limited liability | 3. | 68-0590555 (FEI number, if applicable) | | | |
| | company is organized) 7/29/2004 | 5. | perpetual | | | |
| | (Date of Organization) | | (Duration: Year limited liability company will cease to exist or "perpetual") | | | |
| 6. upon filing (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) | | | | | | |
| 7. 3955 East Shelby Drive, Memphis, TN 38118 | | | | | | |
| | (Street Address of Principal Office) | | | | | |
| 8. | 8. If limited liability company is a manager-managed company, check here | | | | | |
| 9. | . The name and usual business addresses of the managing members or managers are as follows: | | | | | |
| | Con-Way Transportation Services, Inc., 1 | .10 | Parkland Plaza, Ann Arbor, MI 48103 | | | |
| | | | | | | |
| | | | | | | |

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under eath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: Linehaul service

on full loads of LTL shipments moving in transcontinental traffic lanes.

Signature of a member or an authorized representative of a member. (In accordance with section 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.) Con-Way Transportation Services, Inc. (Member) Eberhard G. H. Schmoller, Secretary

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 name of the Limited Liability Company is:

Con-Way Truckload Services, LLC

2. The name and the Florida street address of the registered agent and office are:

Corporation Service Company

(Name)

1201 Hays Street Florida Street Address (P.O. Box NOT ACCEPTABLE)

Tallahassee

FL 32301 City/State/Zip

- -

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, Florida Statutes.

Corporation Service Company By:**Λ** Den Signature)

Deborah D. Skipper Asst. V. Pres.

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

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CON-WAY TRUCKLOAD SERVICES, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SEVENTEENTH DAY OF NOVEMBER, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CON-WAY TRUCKLOAD SERVICES, LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF JULY, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.



arriet Smith Windso

Harriet Smith Windsor, Secretary of State AUTHENTICATION: 3481920

DATE: 11-17-04

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