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ALLEN, SUMMERS, SIMPSON, LILLIE & GRESHAM

A PROFESSIONAL LIMITED LIABILITY COMPANY
ATTORNEYS AND COUNSELORS

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December 29, 2005

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†TN Supreme Court & Federal Court Approved Mediator ©Certified Civil Trial Specialization and Legal Education and Specialization and National Board of Trial Advocacy

> Florida Secretary of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

> > RE:

Our File No. 1161-001

Application for a Certificate of Authority by Atlantic Intermodal Services, LLC to transact business in Florida

Dear Mr./Ms. Secretary:

Enclosed please find the original and one (1) authentic copy of Atlantic Intermodal Services, LLC's Application for Authorization to Transact Business in Florida, along with the executed Certificate of Designation of Registered Agent/Registered Office. I have also enclosed a check for \$130, which represents the filing fee and a Certificate of Status. On behalf of the company, I thank you in advance for your assistance.

Very truly yours,

ALLEN, SUMMERS, SIMPSON LILLIE & GRESHAM, PLAC

Richard H. Allen, Jr.

RHA/Ind Enclosures

cc: Mark George, Atlantic Intermodal Services, LLC

p.s. Additionally, I am also enclosing an original Certificate of Existence, which has been issued within the last ninety (90) days.

COVER LETTER

_	ion of Corporations	
SUBJECT:	Atlantic Intermodal (Name of Lin	Services, LLC mited Liability Company)
Florida," Cert	"Application by Foreign Limited Litificate of Existence, and check are spany to transact business in Florida	iability Company for Authorization to Transact Business in submitted to register the above referenced foreign limited
Please return	all correspondence concerning this	matter to the following:
	Richard 1	H. Allen, Jr.
		H. Allen, Jr. ame of Person) Simpson, Lillie & Gresham irm/Company)
	Allen. Summers	Simpson, Lillie & Gresham
		irm/Company)
	80 Monroe	Ave., Suite 650
		(Address)
	Memphis, Te	ennessee
		tate and Zip Code)
For further in	formation concerning this matter, pl	ease call:
	Richard H. Allen, Jr.	at (901) 763-4200
 -	(Name of Person)	(Area Code & Daytime Telephone Number)
MAII	LING ADDRESS:	STREET ADDRESS:
	on of Corporations	Division of Corporations
P.O. B	Box 6327	Clifton Building
Tallah	assee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
	check for the following amount: 5.00 Filing Fee \$\frac{\mathbb{N}}{2}\$\$130.00 Filing Fee & Certificate of	u v

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.	Atlantic Intermodal Services, LLC					
	(Name of Foreign Limited Liability Company)					
	Tennessee (Jurisdiction under the law of which foreign limited liability company is organized) 3. 27-0132331 (FEI number, if applicable)					
4.	9/20/05 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease be exist or "perpetual")					
6.	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)					
7.	3150 Lenox Park, Suite 312, Memphis, Tennessee 38115					
	(Street Address of Principal Office)					
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: Mark George - 3150 Lenox Park, Suite 312, Memphis, TN 38115					
cu: is	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having stody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate in a foreign language, a translation of the certificate under oath of the translator must be submitted.) Nature of business or purposes to be conducted or promoted in Florida: Transporting goods, materials and supplies					
	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.)					
	Mark George					
	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.

2. The name and the Florida street address of the registered agent and office are:	THE STATE OF THE S
C T Corporation System	HAS:
(Name)	黑 宝
1200 South Pine Island Road	1:52 FLORITO
Florida Street Address (P.O. Box NOT ACCEPTABLE)	D'S
Plantation, Florida 33324	
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.

By: C T Corporation System
(Signature)

1. The name of the Limited Liability Company is:

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

· · Secretary of State **Division of Business Services** 312 Eighth Avenue North 6th Floor, William R. Snodgrass Tower Nashville, Tennessee 37243

ISSUANCE DATE: 12/28/2005 REQUEST NUMBER: 05362553 TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 09/20/2005 STATUS: ACTIVE CORPORATE EXPIRATION DATE: PERPETUAL CONTROL NUMBER: 0502777 JURISDICTION: TENNESSEE

1900 CHURCH ST NASHVILLE, TN 37203 REQUESTED BY: KROLL 1900 CHURCH ST NASHVILLE, TN 37203

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT "ATLANTIC INTERMODAL SERVICES, LLC"

A LIMITED LIABILITY COMPANY DULY FORMED UNDER THE LAW OF THIS STATE WITH DATE OF FORMATION AND DURATION AS GIVEN ABOVE; THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE EXISTENCE OF THE LIMITED LIABILITY COMPANY HAVE BEEN PAID: THAT THE MOST RECENT LIMITED LIABILITY ANNUAL REPORT REQUIRED HAS BEEN FILED; THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND THAT ARTICLES OF TERMINATION OF THE EXISTENCE HAVE NOT BEEN FILED.



FOR: REQUEST FOR CERTIFICATE

ON DATE: 12/28/05

FROM: KROLL DOCUMENT FILING & RETRIEVAL SVCS 1900 CHURCH STREET SUITE 400 NASHVILLE, TN 37203-0000

FEES \$140.00 RECEIVED:

\$0.00

TOTAL PAYMENT RECEIVED:

\$140.00

RECEIPT NUMBER: 00003834326 ACCOUNT NUMBER: 00442386



RILEY C. DARNELL SECRETARY OF STATE