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Erom:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (850)222-1092

Fax Number

: (850)878-5368

### FLORIDA/FOREIGN LIMITED LIABILITY CO.

Greatwide Distribution Logistics, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Eştimated Charge	\$125.00

J. BRYAN
MAY -5 2009
EXAMINER

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Corporate Filing Menu

## 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 REGISTER A FOREIGN

4.	December 10, 2008	5.	beuhernar		
٦.	(Date of Organization)	۷۰.	(Duration: Year limited liability company will exist or "perpetual")	ease to	
6.				35	2
	(Date first transacted business in F (See sections 608.501 & 608.502 F.)	forid S. to	a, if prior to registration.) determine penalty liability)	28.	の正に
7.	12404 Park Central Drive, Suite 300 South			250	느
	Dallas, Texas 75251			記る	3
	(Street Address	s of F	rincipal Office)	TIS.	Ġ
8.	If limited liability company is a manager-managed	d co	прапу, check here 🔀	REE	,
9.	The name and usual business addresses of the mar	nagi	ng members or managers are as follows:		
	Raymond B. Greer - 12404 Park Central Drive, Suite 300 S	South	Dallas, Texus 75251		
	Stephen P. Bishop - (same as above)				

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 oath of the translation must be submitted.)

<ol> <li>Nature of business or purposes to be cond</li> </ol>	ucted or promoted in Florida:
truckload transportation/distribution services	1
Joen 7	- +/
Signature of a member of	or an authorized representative of a member.

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 affiguration under the penalties of perjury that the facts stated herein are true )

John N. Hove, manager

Typed or printed name of signee

John N. Hove - (same as above)

## 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.

The name of the Limited Liability Company is:  Greatwide Distribution Logistics, LLC	
If name unavailable, the alternate name to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	17 SECRE
C T Corporation System	HASS.
(Name)	T E PAGE
1200 South Pine Island Road	FLOS 89
Florida Street Address (P.O. Box NOT ACCEPTABLE)	28 DRID DRID
Plantation FL 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. (Signature)

\$ 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, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY " GREATWIDE DISTRIBUTION LOGISTICS, 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 FIRST DAY OF MAY, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

FILED

09 MAY -4 AM 8: 28

SECRETARY OF STATE
ANT LAHASSEE, FLORIDA

4626661 8300

090422560

You may verify this certificate online at corp. delaware. gov/authver. showl

ADTHENTY CATION: 7279235

DATE: 05-01-09