DDDDDDD10f2 lorida Department of State

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Foreign Limited Liability Company HISTORIC LLC

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Estimated Charge	\$125.00		

3/8/2010

9 2010

COVER LETTER

	egistration Scotlar Vision of Corpor			•
SUBJECT:	USF NDG, LL	C		
		Name of	Limited Liability Company	
The enclosed Existence, an	d "Application by nd obeck are sub	Foreign Limited Liability C nitted to register the above r	Sompany for Authorization to eferenced foreign limited list	n Transact Business in Florids," Certificat oility company to transact business in Flori
Please return	all corresponder	ce concerning this matter to	the following:	
		PILAR.	Tornes	
	· · · ·		Nume of Person	
	USF		LC.	
			Pirm/Company	
	9399	W. His	GINLS ROAD	L Suite São
	_		Address	1
•	Rosen	nont IL	- 600/8	
	:	City/l	State and Zip Code	
	:	Pilar.To	res@USFood.com	
		E-mail address; (to be use	d for future annual report no	tification)
or further info	rmetion concern	ing this matter, please call:		
OL.	ه شهر .	معسره	c (m n	
THE	7C 10/C	ne>		<u> 20-2363</u>
·	, MILINE	di PCP9001 Are	a Code & Daytims Telephon	s Number
	ING ADDRESS m of Corporation		ET ADDRESS: on of Corporations	
	nt of Corporation whom Section		ation Section	
	ox 6327	Clifton	Building	
Tallaha	ekto, FL 32314		accutivo Center Circle asoo, PL 32301	
iclosed is a	check for the	following amount:		
□ \$125	.00 Filing Fee	☐ \$130,00 Filing Fee & Cartificate of Status	☐ \$155.00 Piling Fee & Cortified Copy	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

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

	ust inclu	de "Limited Liability Company," "L.L.C.," o	r"LLC")
f name unavailable, enter alternate name adopted for it	pe brakon	e of transacting business in Piorida and attack	a copy of the
onsent of the managers or managing members adopting ompany," "L.L.C," "LLC,"	the alter	nate name. The alternate name must include '	'Limited Liebili
•			
Delaware	3.	52-2190438	
(Jurisdiction under the law of which foreign limited lie company is organized)	ability	(FEI number, if applicable)	
12/31/2009	5.	Perpetual	
(Date of Organization)	•	(Duration: Year limited liability company	will cease to
•		exist or "perpetual")	1:> (-)
Upon Qualification			==
(Date first transacted husines (See sections 608.501 & 608.5	win Flori	ide, if prior to regulation.)	
		o determine panary (montry)	10.75
9399 W. Higgins Road, Suite 500, Resement, 1L 6001	18		
			E C
			——————————————————————————————————————
(Stopi A)	imen oi	Principal Office)	요분
If limited liability company is a manager-man	മക്ഷ് ദേ	mpany check here	골을
, , , , , , , , , , , , , , , , , , , ,			≥'''
The name and usual business addresses of the	managi	ing members or managers are as follo	W8;
	managi	ing members or managers are as follo	W8;
	managi	ing members or managers are as follo	ws;
The name and usual business addresses of the U.S. Foodservice, Inc., Rosemant, IL 60018	managi	ing members or managers are as follo	ws:
	managi	ing members or managers are as follo	9V8:
	managi	ing members or managers are as follo	9/8:
U.S. Foodservice, Inc., Rosemant, IL 60018			
U.S. Foodservice, Inc., Rosemant, IL 60018 tached is an original certificate of existence, no more than	n 90 days	old, duly sufficial having o	ustody of records
U.S. Foodservice, Inc., Resement, IL 60018 ttached is an original certificate of existence, no more that is diction under the law of which it is organized. (A photo	n 90 days	old, duly sufficial having contacceptable. If the certificate is in a foreign b	ustody of records
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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.

I. The name of the Limited Li	iability Con	npany is:	
USF NDG, LLC			
If unavailable, the alternate to	be used in t	he state of Florida is:	
2. The name and the Florida st	rcot addres	s of the registered agent and office are:	TALLAN
	С	T Corporation System	- 33 6
	·····	(Name)	SA
		South Pine Island Road	OF ST
Floa	rida Succes Ad	dress (P.O. Box NOT ACCEPTABLE)	ORDO ORDO
•	Dine	ntation PL 33324	7-
	1,111	City/State/Zip	_
liability company at the place des agent and agree to act in this cap relating to the proper and comple obligations of my position as regi CT Corporation System	rignated in t acity. I furt ete performa	to accept service of process for the above this certificate, I hereby accept the appointer agree to comply with the provisions ance of my duties, and I am familiar with a provided for in Chapter 608, Florida	itment as registered of all statutes and accept the
By: 12 VV (Signature)	,		
•			
Bernadette McNamara	e 100 co	Elling Tee for Application	
Assistant Secretary	\$ 100.00 \$ 25.00	Filing Fee for Application Designation of Registered Agent	
1 monormit pooroidly	\$ 30.00	Certified Copy (optional)	

5.00 Certificate of Status (optional)

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "USF NDG, 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 FOURTH DAY OF MARCH, A.D. 2010.

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

DATE: 03-04-10