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(((H10000274856 3)))



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA00000023 Phone

: (850)222-1092

Fax Number

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

Email Address:		
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Foreign Limited Liability Company Trans-Trade Jacksonville, LLC

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$130.00



December 27, 2010

FLORIDA DEPARTMENT OF STATE Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: TRANS-TRADE JACKSONVILLE, LLC

REF: W10000059204

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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Karen A Saly Regulatory Specialist II FAX Aud. #: H10000274856 Letter Number: 310A00029764

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SECRETARY OF STANDA

P.O BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJE	CT. Trans-Trade Jacksonville, LLC						
UUL	V4. N	Name of Limited Liability Company					
The enc Existen	losed "Application by Foreign Limited to, and check are submitted to register t	Liability Company for Amborization to Transact Business in Florida," Certificate of he above referenced foreign limited liability company to transact business in Florida					
Ploase r	sturn all correspondence concerning thi	s matter to the following:					
•	Miranda Brower						
		Name of Person					
	Pepper Hamilton LLP						
	Firm/Company						
	1313 N Market Street, Suite 5100						
	Address						
	Wilmington, DB 19501						
•		City/State and Zip Code					
	hrewerm@pepperisw.com						
For furti	is mail address on carning this matter,	ss: (to be used for future amoual report notification) picese call:					
	Miranda Brewer	at (302 777-6571					
	Name of Person	Area Code & Daytime Telephone Number					
MATLING ADDRESS: Division of Corporations Registration Section		STREET ADDRESS: Division of Corporations Kesistration Section					
	P.O. Box 5327 Tallshasson, FL 32314	Cliftee Building 266! Executive Center Circle Tallahatene, FL 32301					
	ed is a check for the following as \$125.00 Filing Fee \$130.00 Filin Certificate of	y Fee & [7]\$155.00 Filing Fee & [5160.00 Filing Fee, Certificate					

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

IN COMPLIANCE WITH SECTION CORSUS, PLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A PORTION LIMITED LIABILITY COMPANY TO TRANSACTE USINESS IN THE STATE OF FLORIDA:

1.	Trans-Trade Jacksonville, LLC
	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C." or "LLC.")
¢0	name unavailable, enter alternate mame adopted for the purpose of transacting business in Florida and attach a copy of the written usent of the managers or managing members adopting the atternate name. The alternate name must include "Limited Liability suparty," "L.L.C." (L.C.")
2.	Delaware 3, 27-4286622
•	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)
4.	December 5, 2010 . 5, perpetual
••	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
б.	
	(Date first transacted business in Florida, if prior to regionation.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7.	1040 Trude Avenue, Suite 106, DFW Airport, TX 75261
•	
	(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:
	Trens-Trade FreightCo Holdings, LLC 1040 Trade Avenue, Suite 106, DPW Airport, TX 75261
θε	Attached is an original confinate of coistence, no more than 90 days old, duly authenticated by the official having custody of records in jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a salation of the certificate under cath of the translatur must be submitted.)
11	Nature of business or purposes to be conducted or promoted in Florida: Global logistics services
	for this
	Signature of a member or an authorized representative of a member.
	(in accordance with section 608.408(3), F.S., the exposition of this document constitutes an affirmation under the
	ponalties of perjury that the frost stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree followy as provided for in s.817.155, P.S.)
	Brad Skinner, President

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:							
Trans-Trade	Jacksonville, LLC						
If unavailable, the alternate to be used in the state of Florida is:							
2. The nam	2. The name and the Florida street address of the registered agent and office are:						
	C T Corporation System						
		(Name)					
	1200 South Pine Island Res	ad					
	Florida Street	et Address (P.O. Box <u>NOT</u> ACCEPTABLE)					
	Plantation	FL 33324					
		City/State/Zip					
liability con agent and ag relating to t	pany at the place designates gree to act in this capacity, he proper and complete perfo f my position arregistered C Temporition By:	and to accept service of process for the above stated limited at in this certificate, I hereby accept the appointment as registere I further agree to comply with the pravisions of all statutes formance of my duties, and I am familiar with and accept the agent as provided for in Chapter 608, Florida Statutes. System (Signature)					
	\$ 22 \$ 30	10.00 Filing Fee for Application 25.00 Designation of Registered Agent 10.00 Certified Copy (optional) 25.00 Certificate of Status (optional)					

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HERBY CERTIFY "TRANS-TRADE JACKSONVILLE, 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 TWENTY-FIRST DAY OF DECEMBER, A.D. 2010.

4909459 8300

101217011

You may verify this ctrtificate online

AUTHENTY CATION: 8444898

DATE: 12-21-10