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#### Florida Department of State Division of Corporations

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Division of Corporations

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From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)B78-5368

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#### Foreign Limited Liability Company Natmi National Truck Terminals II, LLC

Certificate of Status	Ü
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N. Cuttigen MAY \_ 9 2011 5/6/2011

2114-11289

### COVER LETTER

SUBJECT: Natmi National Truck Terr	
,	Name of Limited Liability Company
The enclosed "Application by Foreign Li Existence, and check are submitted to rep	mited Liability Company for Authorization to Transact Business in Florida," Certificate of gister the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concern	ing this matter to the following:
JoliA	Name of Person
	Name of Person .
Aerot	acm
	Firm/Company
_ 201 W	est Street Suite 200
	Address
Annanc	RIS MD ZIVA
- 171100	City/State and Zip Code
E-mail	jgodcy@natmi.com address: (to be used for future annual report notification)
or further information concerning this n	•
to terrier implification concerning mix in	zater, prease can:
	a1 410 , 216 6132
Name of Perso	
MAILING ADDRESS:	STREET ADDRESS:
Division of Corporations	Division of Corporations
Registration Section P.O. Box 6327	Registration Section Clifton Building
Tallahasece, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
inclosed is a check for the following	o amount

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

IN COMPLIANCE WITH SECTION 608.508, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO RECESSER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIUM:

1. Natmi National Truck Terminals II, LLC  (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the wr consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C." "LLC.")	
2. Delaware (Inrisdiction under the law of which foreign limited liability company is organized)  3. 45-1586357 (FEI number, if applicable)	
4. 04/05/2011  (Date of Organization)  (Duration: Year limited liability company will cease to exist or "perpetual")	<u>D</u>
6. Upon Qualification  (Date first transacted business in Florida, if prior to registration.)  (See sections 608.501 & 608.502 F.S. to determine penalty liability)	SECRETA VISION O
7. 201 West street suite 200, annapolis, MD 21401	ARY.OF SI F CORPORI
(Street Address of Principal Office)  8. If limited liability company is a manager-managed company, check here	7.5 FATT
9. The name and usual business addresses of the managing members or managers are as follows:  LPF/Ranger II, LLC, 201 west street suite 200, annapolis, MD 21401	N.
10. Attached is an original certificate of existence, no more than 90 days old, duty authenticated by the official having custody of record 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 ceth of the translator must be submitted.)	sin
11. Nature of business or purposes to be conducted or promoted in Florida:	
real estate	
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. I am awars that any false information submitted in a document to the Department of State constitutes a third degree fellowy as provided for in a.817.155, F.S.)	
Jemes Godey  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.

mayailahla tha altamate	to be used in the state of Florida is:	
mavanable, me atternate	to be used in the state of Profitia is.	
		***************************************
he name and the Florid	la street address of the registered agent and office are:	
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	C T Corporation System	
	C T Corporation System (Name)	- 11 HAY
		1
		11 HAY -6
	(Name)	1
<b>■</b> composition of	(Name) 1200 South Pins Island Road	1

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.

C T Corporation System

With Printfert

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 "NATMI NATIONAL TRUCK TERMINALS II, 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 FIFTH DAY OF MAY, A.D. 2011.

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

4964148 8300

110500283

You may verify this certificate online of cosp.delaware.gov/authver.shtml

Jeffrey W. Bullock, Socretory of State

DATE: 05-05-11