Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000194226 3)))



H150001942263ABC/

_			
То	: Division of C	armarations	
	Fax Number	: (850) 617-6383	
Fr	om:		
	Account Name	: C T CORPORATION SYSTEM	
<b>→</b> 111 (41)		r : FCA000000023	
등 등등	Phone	: (850)205-8842	حد ر≪ت
<u>.</u> 255	Fax Number	: (850)878-5368	<u> </u>
- (7)			<del>}=</del>
**Enter the	email address for	this business entity to be used inter only one email address ple	tot infate -
— Zijannua.	report mailings.	nter only one email address ple	rase. Typ.~
CD Empil	Address:		<u></u>
Email	Viciniaes -		<del></del>
<b>2</b>			<u> </u>
			AT 2
		nited Liability Company	7-

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

aub	10	X019
 <b>Y</b> 8	gul	KER

Electronic Filing Menu

Corporate Filing Menu

Help

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED ILABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(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. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.")
2. Delaware  (Jurisdiction under the law of which foreign limited liability company is organized)  3. 47-4603527  (FEI number, if applicable)
4. Upon Qualification  (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0903, F.S. to defermine penalty liability)
5. 300 E. John Carpenter Fwy, Irving, TX 75062
(Street Address of Principal Office)
6. Same
7.03
(Mailing Address)
The state of the s
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/ate 😩 🗴
Clifford Clark, 300 E. John Carpenter Fwy, Irving, TX 75062, manager
8. 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 translator
must be submitted)
Willow of Jan
Signature of an authorized person
(In accordance with section 605.0203, P.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any falso information submitted in a document to the Department of State constitutes in third degree follows as provided for in s.817.155, F.S.)
Anthony Immini Authorized Person

Typed or printed name of signee

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

Transportation Truck and Trailer Solutions, LLC	,
If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	
C T Corporation System	
(Name)	≧% <b>ઝ</b>
1200 South Pine Island Road	AUG CALA
Florida Street Address (P.O. Box NOT ACCEPTABLE)	- 145 ASS
Plantation FL 33324	3
City/State/Zip	9: 42 5:14:E
Having been named as registered agent and to accept service of process for the above s liability company at the place designated in this certificate, I hereby accept the appoint registered agent and agree to act in this capacity. I further agree to comply with the pr statutes relating to the proper and complete performance of my duties, and I am familia accept the obligations of my position as registered agent as provided for in Chapter 60.	stated limited ment as covisions of all ar with and
Topporation Statutes  Tammy Tofteroo  (Signature) Vice President	
At Chipdration Physicis   SIMILIA   Otto	

Filing Fee for Application
Designation of Registered Agent

Certified Copy (optional)

Certificate of Status (optional)

\$ 100.00

\$ 25.00

\$ 30,00

5.00

## Delaware

PAGE '

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TRANSPORTATION TRUCK AND TRAILER SOLUTIONS, 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 SEVENTH DAY OF AUGUST, A.D. 2015.

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

5775311 8300

151145800

You may verify this cortificate online at corp. delaware, gov/authver. shtml

jeffrey W. Bullock, Secretary of State

AUTHENT CATION: 2625341

DATE: 08-07-15