11/1700000/592

(Re	questor's Name)	<u> </u>			
(Ad	dress)				
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(Cit	y/State/Zip/Phone	e #)			
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K. SALY FEB 23 2017

COVER LETTER

TO: Registration Section Division of Corporations

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SUBJECT: R	OADRUNNER LO	GISTICS LLC						
SUBJECT: _		Name of	Limited Liability (Company		1		
The enclosed "A Existence, and o	Application by For check are submitted	eign Limited Liability Comp I to register the above refere	oany for Authoriza enced foreign limit	tion to Tra ed liability	nsact Business in Florida," company to transact busin	Certificate of ness in Florida		
Please return al	l correspondence c	oncerning this matter to the	following:					
	LEONID CHE	RNOY						
		N	ame of Person					
	ROADRUNNER LOGISTICS LLC							
	Firm/Company							
	PO BOX 24579	8						
	Address							
	BROOKLYN N	IY 11224						
		City/S	tate and Zip Code			•		
	LCHERNOY@R	RLONLINE.COM						
		E-mail address: (to be used	d for future annual	report not	ification)			
For further info	rmation concerning	this matter, please call:						
LEON	NID CHERNOY		917 at (415-113	22			
	Name o	f Contact Person .	Area Code	Day	time Telephone Number			
Division Regist P.O. B	ING ADDRESS; on of Corporations ration Section lox 6327 assee, FL 32314			Division Registrati Clifton B 2661 Exe	of Corporations ion Section uilding cutive Center Circle iee, FL 32301			
	neck for the follow 25.00 Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filir Certified Copy	ig Fee &	☐ \$160.00 Filing Fee, C of Status & Certified Co			

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 LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

ROADRUNNER LOGI	STICS LLC		
(Name of Fore	ign Limited Liability Company; must include "Limit	ed Liability Company," "L.L.C.," or '	'LLC.")
RRL IN-FL LLC			
Liability Company," "L.L.C,"	ternate name adopted for the purpose of transacting be or "LLC.")	ousiness in Florida. The alternate nam	e must include "Limited
_{2.} INDIANA	3. 47-4950	6091	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)	
4	(Date first transacted business in Florida, if r	orior to registration.)	
	(Date first transacted business in Florida, if p (See sections 605.0904 & 605.0905, F.S. to det	termine penalty liability)	
5. 120 EAST MARKET	STREET, STE 1235		. 2
INDIANAPOLIS IN 4			2011FEB 21
	(Street Address of Principal Office)		宝色 岛 下
6. PO BOX 245798			. 502
BROOKLYN, NY 112			開まし
	(Mailing Address)		्राष्ट्र ५
7. Name and street addres	s of Florida registered agent: (P.O. Box NOT a	acceptable)	語言。「
Name:	LEONID CHERNOY	FILIN	G CANCELLE
Office Address:	1800 SOUTH OCEAN DRIVE, APT 3003	RETU	RNED CHECK
	HALLANDALE BEACH	, Florida 33009	
	(City)	(Zip code)	-
designated in this applica to complywith the provisi	gistered agent and to accept service of process tion, I hereby accept the appointment as registions of all statutes relative to the proper and comy position as registered agent.	ered agent and agree to act in thi	s capacity. I further agree
	(Registered agent's sign	nature)	•
8. The name, title or capa	acity and address of the person(s) who has/have	authority to manage is/are:	
LEONID CHERNOY - 13	800 SOUTH OCEAN DRIVE, APT 3003 HALI	LANDALE BEACH FL 33009 - N	MGR
9. Attached is a certificate jurisdiction under the law of the translator must be so	of existence, no more than 90 days old, duly au of which it is organized. (If the certificate is in authorized.)	foreign language, a translation of	custody of records in the the certificate under oath
	5	•	
	I in accordance with section 605.0203 (1) (b), Floothe Department of State constitutes a third degrated LEONID CHERNOY		

Typed or printed name of signee

State of Indiana Office of the Secretary of State

2017 FEB 21 PH 3: 15

SECRETARY OF STATE
TALLAHASSEE, FLORIS

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, CONNIE LAWSON, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

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ROADRUNNER LOGISTICS LLC

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on September 02, 2015, and was in existence or authorized to transact business in the State of Indiana on February 14, 2017.

I further certifiy this Domestic Limited Liability Company has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed, or taken place.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, February 14, 2017

Corrie Famon

CONNIE LAWSON
SECRETARY OF STATE

201509021176480 / 2017221499

Verify this certificate:https://bsd.sos.in.gov/ValidateCertificate