

M17000005838

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

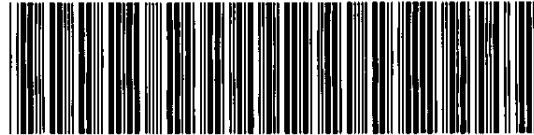
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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07/07/17--01006--003 **500.00

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DEPARTMENT OF REVENUE
17 JUL - 7 AM 11 18
FILED
17 JUL - 7 AM 9:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. SCOTT
JUL 12 2017

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP:

7-7-17

☐ **CERTIFIED COPY**

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Foreign

1. XPO Logistics NM, LLC

(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

FILED
JUL -7 AM 9:08
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 10, 2017

CORPORATE ACCESS INC.

SUBJECT: XPO LOGISTICS NLM, LLC
Ref. Number: W17000056368

FILED
17 JUL -7 AM 9:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for XPO LOGISTICS NLM, LLC and your check(s) totaling \$500.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

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

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Pijaux
Regulatory Specialist

Letter Number: 117A00013818

Corrected

RECEIVED
DEPARTMENT OF STATE
JUL 11 PM 2:42
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: XPO Logistics NLM, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Candice Collins

Name of Person

Registered Agent Solutions, Inc.

Firm/Company

261 Directors Blvd Ste 300

Address

Houston, TX 78744

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Candice Collins

Name of Contact Person

at

888

Area Code

705-7274

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

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JUL - 7 AM 9:08
TALLAHASSEE, FLORIDA

**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:

1. XPO Logistics NLM, 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. 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. _____

(FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 300 Galleria Officentre, Suite 301, Southfield, MI 48034

(Street Address of Principal Office)

6. 1717 NW 21st Avenue, Portland, OR 97209

(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Registered Agent Solutions, Inc.

Office Address: 155 Office Plaza Dr., Suite A


Tallahassee, Florida 32301

(City)

(Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

See attached.

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)



Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Riina Tohvert, Assistant Secretary

Typed or printed name of signer

FILED
JUL - 7 AM 9 08
TALLAHASSEE, FLORIDA

XPO Logistics NLM, LLC

Managers and Officers

Managers · Troy A. Cooper
· John J. Hardig

Officers · Lou Amo	President
· Michael O'Donnell	Chief Operating Officer
· Ravi Tulsyan	Senior Vice President and Treasurer
· Robert Cerutti	Vice President - Global Risk Management
· John J. Hardig	Vice President and Assistant Treasurer
· Karlis Kirsis	Vice President and Secretary
· Lanny Gower	Assistant Secretary
· Kim A. Pearson	Assistant Secretary
· Riina Tohvert	Assistant Secretary

Address for all Officers: 5 American Lane, Greenwich, CT 06831

Address for all Managers: 5 American Lane, Greenwich, CT 06831

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TALAMASSEE, FLORIDA

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "XPO LOGISTICS NLM, 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 SIXTH DAY OF JULY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "XPO LOGISTICS NLM, LLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF JUNE, A.D. 2009.

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


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JUL -7 PM 9:08
TALLAHASSEE, FLORIDA



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SR# 20175103266

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


Jeffrey W. Bullock, Secretary of State

Authentication: 202834085

Date: 07-06-17