

M21000009078

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

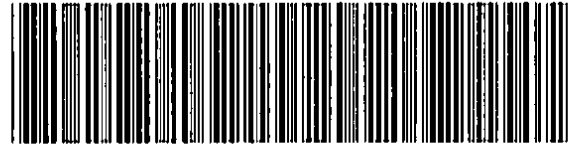
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300367887573

06/16/21--01014--026 **763.75

2021 JUN 16 PM 4:12

11 2021



June 11, 2021

Florida Department of State
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

RE: CFI Temp-Control, LLC (FEIN 85-1568707)
*Application By Foreign Limited Liability Company For
Authorization To Transact Business In Florida*

Dear Sir/Madam:

Enclosed on behalf of the above entity, please find the above executed application, our check in the amount of \$763.75 in payment of the required fee, annual report and penalty, as well as a copy of a Certificate of Good Standing from the Missouri Secretary of State's office, dated June 9, 2021.

Thank you for your assistance, and if you have any questions, or need anything further, please contact me.

Sincerely,

A handwritten signature in black ink, appearing to read "Jeffrey S. Monroe".

Jeffrey S. Monroe

General Counsel - US
TFI International

417-659-5021
Fax: 417-659-5067
jmonroe@tfintl.com

Enclosures

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CFI Temp-Control, 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:

Jeffrey S. Monroe

Name of Person

TFI International Inc.

Firm/Company

4701 E. 32nd Street

Address

Joplin, MO 64804

City/State and Zip Code

jmonroe@tfintl.com

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

For further information concerning this matter, please call:

Jeffrey S. Monroe

417

659-5021

at (_____) _____

Name of Contact Person

Area Code

Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$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

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. CFI Temp-Control, 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. Missouri
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 85-1568707
(FBI number, if applicable)

4. June 23, 2020
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 4701 E. 32nd Street
(Street Address of Principal Office)

6. 4701 E. 32nd Street
(Mailing Address)

Joplin, MO 64804

Joplin, MO 64804

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

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.

Charlene Sati, Asst. VP. 06-10-21
(Registered agent's signature)

2021 JUN 16 PM 4:12

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: **Name and Address:**

☐ Manager Name: Alain Bedard

☐ Member Address: 8801 Trans-Canada Highway

☐ Authorized Suite 500

Person Saint-Laurent, Quebec H4S 1Z6

☒ Other Chairman ☐ Other

Title or Capacity: **Name and Address:**

☐ Manager Name: Gregory L. Orr

☐ Member Address: 4701 E. 32nd Street

☐ Authorized Joplin, MO 64804

Person

☒ Other President ☐ Other

☐ Manager Name: Michael J. Hinz

☐ Member Address: 4701 E. 32nd Street

☐ Authorized Joplin, MO 64804

Person

☒ Other Senior VP ☐ Other

☐ Manager Name: Melinda J. Green

☐ Member Address: 4701 E. 32nd Street

☐ Authorized Joplin, MO 64804

Person

☒ Other VP-Finance ☐ Other

☐ Manager Name: Tom Anderson

☐ Member Address: 4701 E. 32nd Street

☐ Authorized Joplin, MO 64804

Person

☒ Other VP - IT ☐ Other

☐ Manager Name: Chantal Martel

☐ Member Address: 8801 Trans-Canada Highway

☐ Authorized Suite 500

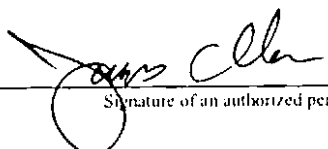
Person Saint-Laurent, Quebec H4S 1Z6

☒ Other VP-Ins. & Comp. ☐ Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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)

10. 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.



Signature of an authorized person

Jeffrey S. Monroe

Typed or printed name of signee

S. Attachment: (Additional company officials)

<u><i>Name and Title</i></u>	<u><i>Business Address</i></u>
Randall S. Cornell, VP, Fleet/Maintenance	4701 E. 32 nd Street, Joplin, MO 64804
Matthew S. Staniszewski, VP, Operations	4701 E. 32 nd Street, Joplin, MO 64804
Josiane Langlois, Secretary	8801 Trans-Canada Hwy, Suite 500, St-Laurent, QC H4S 1Z6
Martin Quesnel, Treasurer	8801 Trans-Canada Hwy, Suite 500, St-Laurent, QC H4S 1Z6
Jeffrey S. Monroe, Assistant Secretary	4701 E. 32 nd Street, Joplin, MO 64804

STATE OF MISSOURI



John R. Ashcroft
Secretary of State

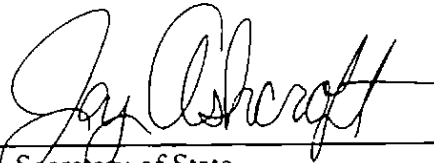
CERTIFICATE OF GOOD STANDING

I, John R. Ashcroft, Secretary of State of the STATE OF MISSOURI, do hereby certify that the records in my office and in my care and custody reveal that

CFI Temp-Control, LLC
LC1712221

A Missouri entity was created under the laws of this State on 6/23/2020, and is Active, having fully complied with all the requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and
cause to be affixed the GREAT SEAL of the State of Missouri.
Done at the City of Jefferson, the 9th day of June, 2021.


Secretary of State

Certification Number: CERT-IN87495

