

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M99000001270

**FILED**  
**Dec 23, 2009**  
**Secretary of State**

**Entity Name:** WALLENIOUS WILHELMSSEN LOGISTICS AMERCAS, LLC

**Current Principal Place of Business:**

188 BROADWAY  
WOODCLIFF LAKE, NJ 07675

**New Principal Place of Business:**

**Current Mailing Address:**

188 BROADWAY  
WOODCLIFF LAKE, NJ 07675

**New Mailing Address:**

**FEI Number:** 22-3659198

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: PAUL DAVIES

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: CONNOR, CHRISTOPHER J  
Address: 188 BROADWAY  
City-St-Zip: WOODCLIFF LAKE, NJ 07675

Title: MGR ( ) Delete  
Name: CONATON, DON  
Address: 188 BROADWAY  
City-St-Zip: WOODCLIFF LAKE, NJ 07675

Title: CFO ( ) Delete  
Name: HYNEKAMP, MICHEAL  
Address: 188 BROADWAY  
City-St-Zip: WOODCLIFF LAKE, NJ 07677

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: CONATON, DAN  
Address: 188 BROADWAY  
City-St-Zip: WOODCLIFF LAKE, NJ 07675

Title: CFO (X) Change ( ) Addition  
Name: HYNEKAMP, MICHAEL  
Address: 188 BROADWAY  
City-St-Zip: WOODCLIFF LAKE, NJ 07677

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: PAUL DAVIES

MGR

12/23/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date