Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6384

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)222-1092
Fax Number : (850)878-5368

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CORPORATION REINSTATEMENT
SAW GRASS TRANSPORT, INC.

Certificate of Status	0
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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P99000058957

1. Corporation Name

SAW GRASS TRANSPORT, INC.

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
One Dole Drive	One Dole Drive
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Westlake Village, CA	City & State: Westlake Village, CA
Zip: 91362 Country: U.S.A.	Zip: 91362 Country: U.S.A.

CR2E081 (11/10)

4. Date Incorporated or Qualified To Do Business in Florida: 6/25/1999

5. FEI Number: 65-0933238 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $30.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: C T Corporation System

Street Address (P.O. Box Number is Not Acceptable): 1200 South Pine Island Road

Suite, Apt. #, Etc.:

City: Plantation State: FL Zip Code: 33324

8. I, being appointed the registered agent of the above named corporation, hereby accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: Chris McNabb Assistant Secretary Date: 2/24/2011
REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
	PLEASE SEE ATTACHED LIST		

10. E-mail Address: David.Marote@dole.com
(To be used for future annual report notification)

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that 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: JEFFREY B. CONNER, VICE PRES & SECRETARY 2/22/11 818-879-6600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

FLD10 - 01/19/2011 C T System Online

2/25/11
DP

SAW GRASS TRANSPORT, INC.
a Florida corporation in the process of reinstatement

STREET ADDRESS FOR ALL DIRECTORS AND OFFICERS:

One Dole Drive
Westlake Village, CA 91362

DIRECTORS:

C. Michael Carter
David A. DeLorenzo

OFFICERS:

David H. Murdock	Chief Executive Officer
David A. DeLorenzo	President
Joseph S. Tesoriero	Vice President and Chief Financial Officer
Yoon J. Hugh	Chief Accounting Officer
Ronald Bouchard	Vice President
C. Michael Carter	Vice President
Jeffrey B. Conner	Vice President and Secretary
Stuart Jablon	Vice President
Beth Potillo	Vice President

Current as of 2/17/2011