2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M15000008164

Entity Name: HAPAG-LLOYD (AMERICA) LLC

Current Principal Place of Business:

399 HOES LANE

PISCATAWAY, NJ 08854

Current Mailing Address:

399 HOES LANE

PISCATAWAY. NJ 08854 US

FEI Number: 13-2520327 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

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

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:

Electronic Signature of Registered Agent

Date

FILED Mar 02, 2017

Secretary of State

CC1712557554

Authorized Person(s) Detail:

Title CHAIRMAN Title PRESIDENT

Name HABBEN JANSEN, ROLF Name FREESE, WOLFGANG

Address BALLINDAMM 25 Address 399 HOES LANE

City-State-Zip: HAMBURG AL City-State-Zip: PISCATAWAY NJ 08854

Title SECRETARY Title SVP

Name ANGELATOS, HERCULES Name BRAEDEL, PETER
Address 399 HOES LANE Address 399 HOES LANE

City-State-Zip: PISCATAWAY NJ 08854 City-State-Zip: PISCATAWAY NJ 08854

Title SVP Title SVP

Name MCGRATH, PATRICK Name DAVIS, DON

Address 399 HOES LANE Address 399 HOES LANE

City-State-Zip: PISCATAWAY NJ 08854 City-State-Zip: PISCATAWAY NJ 08854

Title SVP Title SVP

Name DECICCIO, ANTONIO Name PEARSON, HARDY

Address 3350 SW 148TH AVE Address 3030 WARRENVILLE RD

City-State-Zip: MIRAMAR FL 33027 City-State-Zip: LISLE IL 60532

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I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANTHONY CASTELLANO

CORPORATE CONTROLLER

03/02/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued:

Title SVP Title SVP

Name ENGEL , THOMAS Name CLEAVE, GARY

Address 11410 GREENS CROSSING Address 245 TOWNPARK DRIVE

City-State-Zip: HOUSTON TX 77067 City-State-Zip: KENNESSAW GA 30144

Title CONTROLLER Title TREASURER

Name CASTELLANO, ANTHONY Name STILLITANO, MICHAEL

Address 399 HOES LANE Address 399 HOES LANE

City-State-Zip: PISCATAWAY NJ 08854 City-State-Zip: PISCATAWAY NJ 08854