Filing Fee: \$150.00



#### STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Division of Business Services 148 W. River Street Providence, Rhode Island 02904-2615

#### LIMITED LIABILITY COMPANY

# SECRETARY OF STATE COMPORATIONS DIV

#### **APPLICATION FOR REGISTRATION**

Pursuant to the provisions of Section 7-16-49 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the state of Rhode Island, and for that purpose submits the following statement:

1.	The name of the limited liability company is:					
	Saia Sales, LLC					
	This company has been duly organized in its state of formation as a	low-profit limited liability compa	ny. (Check bo	x if applicable)		
2.	2. The name, if different, under which it proposes to register ar	The name, if different, under which it proposes to register and transact business in Rhode Island is:				
3.	The limited liability company is organized under the laws of Delaware					
4.	The date of its organization is 12/31/2013					
5.	. The period of duration of the limited liability company is (if perpetual, so state) perpetual					
6.	6. The address of the limited liability company's resident agent	in Rhode Island is:				
	450 Veterans Memorial Parkway, STE 7A	East Providence	, RI 0	2914		
	(Street Address, <u>not</u> P.O. Box)	(City/Town)	·	(Zip Code)		
	and the name of the resident agent at such address is CT Corporation System  (Name of Agent)					
7.	The secretary of state is appointed the agent of the foreign limited liability company for service of process if at an time there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence.					
8.	The address of any office required to be maintained in the state or other jurisdiction under the laws of which the limited liability company is organized is:					
	Not Applicable					
9.	9. The mailing address for the limited liability company is:  Output  Description:					
	11465 Johns Creek Pkwy, STE 400, Johns Creek, GA 30097					
	FILED					
<b>-</b>	Franchis 450	MAR <b>3 1</b> 2014				
	Form No. 450 Revised: 07/12	49-001	~ M			
		By	<u> </u>			
		A.A. 11.	114	. 111 .		

10.	Management of the Limited Liability Company (check one only):			
A.	The limited liability company is to be No. 11 - DO <u>NOT</u> LIST ANY NAME	managed very by its members. (If you have checked this box, go to item S IN SECTION B.)		
	<u>or</u>			
В.	. The limited liability company is to be managed by one (1) or more managers. (If the limited liability company has managers at the time of the filing of these Articles of Organization, state the name and address of each manager.)			
	Manager	Address		
_				
_				
_				
	rtificate of good standing duly authenticated by the secretary of state or other er which the foreign limited liability company was organized.			
12. TI	he date this Application for Registration	is to become effective, if later than the date of filing, is:		
(not prior to, nor more than 30 days after, the filing of this Application for Registration)				
		Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.		
Date:	03/20/2014	Saia Sales, LLC  Print Exact Name of Limited Liability Company Making Application		
		By ATM (MMU) M (COMMAND)		
		Signature of Authorized Person		

## Delaware

PAGE 1

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SAIA SALES, 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 ELEVENTH DAY OF MARCH, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

SECRETARY OF STATE CORPORATIONS DIV

5456354 8300

140317986

AUTHENTICATION: 1198373

DATE: 03-11-14

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



#### STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

