Filing Fee: \$150.00

ID Number: 155365



### STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

LIMITED LIABILITY COMPANY

2006 APR 13 AM 11: 3

RECEIVED
CORPORATIONS DIV
SECRETARY OF STATE

### **APPLICATION FOR REGISTRATION**

Pursuant to the provisions of Section 7-16-49 of the General Laws of Rhode Island, I956, 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:					
	A-C MOTOR EXPRESS, LLC					
2.	The name, if different, under which it proposes to r	register and transact business in l	Rhode Islan	d is:		
3.	, congenious and or	<del></del>				
4.	The date of its organization is December 6, 200	D2				
5.	The period of duration of the limited liability company is (if perpetual, so state) PERPETUAL					
6.	The address of the limited liability company's resident agent in Rhode Island is:					
	300 WAMPANOAG TRATL	RIVERSIDE	, RI	02915		
	(Street Address, not P.O. Box)	(City/Town)		(Zip Code)		
	and the name of the resident agent at such addres		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 reasonabl 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:					
	339-C BLISS STREET, WEST SPRINGFIELD, MA	. บาบช <del>9</del>				
9.	The mailing address for the limited liability compan	ny is:				
	339-C BLISS STREET, WEST SPRINGFIELD, MA	•		0		
				בוו בת		

FILED

APR 13 2006

By OR 0 95791

Form No. 450 Revised: 12/05

10.		Management of the Limited Liability C	ompany:		
A	۸.	The limited liability company is to be mo. 11.)	ability company is to be managed by its members. (If you have checked this box, go to it		
		<u>or</u>			
В	B. 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.)				
		<u>Manager</u>	<u>Address</u>		
-	JO	HN C. NEKITOPOULOS	339-A BLISS STREET, WEST SPRINGFIELD, MA 01089		
_					
_		<del></del>			
_					
_		· · · · · · · · · · · · · · · · · · ·			
_		<del> </del>			
	This application is accompanied by a certificate of good standing duly authenticated by the secretary of state or other authorized officer of the jurisdiction under which the foreign limited liability company was organized.				
			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	e:_	14.6.06	A-C MOTOR EXPRESS, LLC		
			Print Exact Name of Limited Liability Company Making Application		
			By Ach Chilipporlos Signature of authorized person		
			Signature of authorized person		



# The Commonwealth of Massachusetts

## Secretary of the Commonwealth

State House, Boston, Massachusetts 02133

### March 28, 2006

#### TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of a Limited Liability Company was filed in this office by

### A-C MOTOR EXPRESS, LLC

in accordance with the provisions of Massachusetts General Laws Chapter 156C on **December** 6, 2002.

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation or withdrawal; and that, said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are: **JOHN C. NEKITOPOULOS** 

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: JOHN C. NEKITOPOULOS

The names of all persons authorized to act with respect to real property listed in the most recent filing are: **JOHN C. NEKITOPOULOS** 



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

William Travino Galicin

on the date first above written.

Secretary of the Commonwealth

Processed By:TC