

## **COMMONWEALTH OF KENTUCKY** MICHAEL G ADAMS SECRETARY OF STATE

1213118.06

Michael G. Adams

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COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE			Kentucky Secretary of State Received and Filed: 6/7/2022 11:35 AM		
Division of Business Filings P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov		Certificate of Authority (Foreign Business Entity)			
Pursuant to the provisions of KRS 14A and, for that purpose, submits the follow		eby applies for authority to trans	act business in Ken	tucky on behalf of th	ne entity named belo
business trust limited partnership non-profit llc		nonprofit corporation limited liability company ltd cooperative association professional service corporation	ed liability company statutory trust		
2. The name of the entity is XPO NAT S	olutions, LLC	o the name on record with the	Socratary of State	\	·
			Secretary of State.	)	
<ol> <li>The name of the entity to be used in</li> <li>The state or country under whose la</li> <li>The date of organization is <u>11/30/22</u></li> </ol>		(Only provide if "real name"	ration is		·
6. The mailing address of the entity's p	rincipal office is		(If left blank, o	duration is conside	ered perpetual.)
2055 NW Savier Street		Portland	OR	97209	
Street Address		City	State	Zip Co	ode
7. The street address of the entity's registered office in Kentucky is 828 Lane Allen Road, Suite 219		sLexington	KY	40504	
Street Address (No P.O. Box Number	rs)	City		State	Zip Code
and the name of the registered agent a	t that office is Registered Age	ent Solutions. Inc.			·
8. The names and business addresses	of the entity's representati	ves (secretary, officers and direct	tors, managers, trus	tees or general part	ners):
See attached Name	Street or P.O. Box	City	State	Zip Co	ode
		,		p = .	
Name	Street or P.O. Box	City	State	Zip Co	ode
Name	Street or P.O. Box	City	State	Zip Co	ode
9. If a professional service corporation, and treasurer are licensed in one or mo statement of purposes of the corporatio	re states or territories of the	ers, not less than one half (1/2) o United States or District of Colu	f the directors, and a mbia to render a pro	all of the officers oth ofessional service do	er than the secretary escribed in the
10. I certify that, as of the date of filing	this application, the above-i	named entity validly exists under	the laws of the jurise	diction of its formatio	on.
11. If a limited partnership, it elects to b	e a limited liability limited p	artnership. Check the box if app	olicable:		
12. If a limited liability company, chec	k box if manager-manage	d: 🔳			
13. This application will be effective upo	on filing.				
Ridwould		Riina Tohvert, Assistant Secret	ary	6/6/22	
Signature of Authorized Representative		Printed Name & Tit	ile	Date	
Registered Agent Solutions,	Inc.	, consent to serve as the	registered agent on	behalf of the busine	ess entity.
Type/Print Name of Registered Agent	Ad	am Saldana		Secretary	6/6/2022
Signature of Registered Agent	Printe	d Name	Title	· · · · · · · · · · · · · · · ·	Date

Signature of Registered Agent

## **XPO NAT SOLUTIONS, LLC**

## **MANAGERS & OFFICERS**

as of June 6, 2022

Name	Title	Address		
Christopher J. Signorello	Manager and President	Five American Lane		
		Greenwich, CT 06831		
Ravi Tulsyan	Chief Financial Officer	Five American Lane		
		Greenwich, CT 06831		
Lorraine Sperling	Senior Vice President,	Five American Lane		
	Treasurer	Greenwich, CT 06831		
Lanny R. Gower	Assistant Secretary	2055 NW Savier Street		
		Portland, OR 97209		
James X. Petrella	Assistant Secretary	11215 N. Community House Road		
		Charlotte, NC 28277		
Riina Tohvert	Assistant Secretary	Five American Lane		
		Greenwich, CT 06831		

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