UTILITIES AND TRANSPORTATION COMMISSION

RECEIVED

JAN 112013

WASH, UT, & TP COMM

1300 South Evergreen Park Drive S.W.

P.O. Box 47250

Olympia, WA 98504-7250 Transportation: 360-664-1222

Fax: 360-586-1181

APPLICATION FOR CHANGE OF NAME OR BUSINESS STRUCTURE (excluding Household Goods carriers and Brokers)

FEE: \$50 (For Commission Use Only) Received Date: Legal Action: Number: 111 2068-200-02 Insurance: Holder of Permit No. CC064136 TC for authority to change the name of the carrier named below, pursuant to the provisions of 81.80 RCW and WAC 480-14 to: NEW NAME: Americold Transportation Services, LLC 678-441-1400 PHONE #: (New Individual, Partnership or Corporate Name) MAILING ADDRESS: 10 Glenlake Parkway, Suite 800 South Atlanta GΑ 30328 (Street/P.O. Box) (State) (City) (Zip) PHYSICAL ADDRESS: 10 Glenlake Parkway, Suite 800 South Atlanta 30328 (Street/P.O. Box) (State) (Zip) (City) TYPE OF NEW BUSINESS STRUCTURE %ondividual %partnership %CORPORATION - STATE OF INCORPORATION NAME TITLE STOCK DISTRIBUTION or PERCENTAGE OF SHARE CURRENT NAME: Cold Chain Transportation, LLC PHONE #: 678-441-1400 (Current name as shown on permit) ADDRESS: 10 Glenlake Parkway, Suite 800 South 30328 Atlanta GA (Street/P.O. Box) (Zip) (City) (State) TYPE OF CURRENT BUSINESS STRUCTURE % PARTNERSHIP % CORPORATION - STATE OF INCORPORATION % dNDIVIDUAL DE LLC **NAME** TITLE STOCK DISTRIBUTION or PERCENTAGE OF SHARE 40

Carrier affirms that the change of name or business structure does not involve a change in ownership, management, or control of the operating authority. Petitioner further submits with this application approved copies of the amended Articles of Incorporation, if applicable. The undersigned applicant requests that the Commission enter an order granting its petition as provided for in Chapter 81.80 RCW.

Thereby declare and affirm that the above and foregoing information	is true to the best of my knowledge and
belief.	, ,
Lacel 10/100ams	
_ deal Williams	12-21-12
Signature(s)	Date

APPLICATION INSTRUCTIONS

"APPLICATION FOR CHANGE OF NAME OR BUSINESS STRUCTURE" may be used **ONLY** in the following circumstances:

- Change of carrier's name, with no change in ownership or business structure.
- O Change of business structure from individual to corporation to incorporate an individual's business when the individual is the majority stockholder, or, by an individual to a partnership, when the individual is the majority partner, or from a corporation to a proprietorship of the majority shareholder, or by a partnership to a proprietorship of the majority partner.
- O' Change of name resulting from a change in business structure from a partnership to a corporation established to incorporate the partnership business, when the partners are the majority stockholders in the same proportionate ownership.
- O' Change of name resulting from a change in business structure from a corporation to another corporation where both corporations are wholly owned by the same stockholders in the same proportions.

BEFORE SUBMITTING THIS APPLICATION YOU MUST INCLUDE:

\square	The completed application form.
\square	The \$50.00 fee.
	If an individual name change, legal proof of the change, e.g. marriage license, divorce decree.
\Box	If a corporation, a copy of the approved amended Articles of Incorporation.
	Have your insurance agent submit a new Form E Certificate of Insurance in the new name.



POSTAL MONEY ORDER

Serial Number

Year, Month, Day

Post Office

IIS Dollars and Cente

20507395577

2012-12-17 303361

\$50.00

Address 300 S Evergrow PARK Dr. Swiron

Olympia WA 95504

Memo

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SEE REVERSE WARNING • NEGOTIABLE ONLY IN THE U.S. AND POSSESSIONS 20573955771



U.S. Department of Transportation Federal Motor Carrier Safety Administration

1200 New Jersey Ave., S.E. Washington, DC 20590

SERVICE DATE December 18, 2012

DECISION MC-590148 COLD CHAIN TRANSPORTATION LLC ATLANTA, GA REENTITLED AMERICOLD TRANSPORTATION SERVICES, LLC

On December 12, 2012, applicant flied a request to have the Federal Motor Carrier Safety Administration's records changed to reflect a name change,

It is ordered:

The Federal Motor Carrier Safety Administration's records are amended to reflect the carrier's name as AMERICOLD TRANSPORTATION SERVICES, LLC.

Within 30 days after this decision is served, the applicant must establish that it is in full compliance with the statute and the insurance regulations by having amended filings on prescribed FMCSA forms (BMC91 or 91X or 82 for bodily injury and property damage liability, BMC 34 or 83 for cargo liability, or a BMC 84 or 85 for broker security and BOC-3 for designation of agents upon whom process may be served) submitted on its behalf. Copies of Form MCS-90 or other "certificates of insurance" are not acceptable evidence of insurance compliance. Insurance and BOC-3 filings should be sent to Federal Motor Carrier Safety Administration, 1200 New Jersey Ave., S.E., Washington, DC 20590.

The applicant is notified that failure to comply with the terms of this decision shall result in revocation of its operating rights registration, effective 30 days from the service date of this decision.

To verify that the applicant is in full compliance, call (202)368-7000 or visit our web site at: http://li-public.fmcsa.dot.gov. Any other questions regarding the action taken should be directed to (202)366-9805.

Decided: December 13, 2012

By the Federal Motor Carrier Safety Administration

Jeffrey L. Seorist, Chief

Offer I Stant

612-59M

Information Technology Operations Division



10 West Market Street Suite 1500 Indianapolis, IN 46204

ANDREW K. LIGHT alight@scopelitis.com

The full service transportation law firm

www.scopelitis.com

Main (317) 637-1777 Fax (317) 687-2414

RECEIVED

JAN 112013

WASH. UT. & TP COMM

January 9, 2013

Washington Utilities and Transportation Commission 1300 South Evergreen Park Drive SW P.O. Box 47250 Olympia, WA 98504-7250

RE

Cold Chain Transportation, LLC

Permit Number CC-064136

Name Change

To Whom It May Concern:

This letter is written to request a name change with regard to the intrastate authority of Cold Chain Transportation, LLC. The company has changed its name to Americold Transportation Services, LLC, and requests its intrastate authority to be reissued in the new name. The following documents are attached in connection with this request:

- 1. Application For Change of Name;
- 2. Money Order in the amount of \$50 to cover filing fee;
- 3. Washington Secretary of State printout evidencing name change;
- 4. Copy of FMCSA Reentitlement Decision.

There has been no change in the business structure or ownership of the company in connection with the name change. With regard to insurance, a new Form E liability filing will be submitted directly by the insurance carrier. If you have any

Page 2 January 9, 2013

questions concerning this matter please contact me or Susan Laetsch of this office. I thank you for your assistance.

Very truly yours,

Andrew K/Light

AKL/sl Enclosures

 $cc: Robert \ Williams \ w/enclosures \\ \text{$\mathbb{H}_{WPDCS}(Americold\ Transportation-was\ Cold\ Chain\ Transportation/Filling\ Letters/WA.IntraNameChange\ doc} \\$



AM Filed w

Form E UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY DAMAGE LIABILITY CERTIFICATION OF INSURANCE



Filed with Washington Utilities & T	ansportation Comm	ssion	(herein after called Ager
(Nac	me of Agency)		
This is to certify that the Hartford Fire	Insurance Company		
(Nan	ne of Company)		
(herein after called Company) of ONE HARTFO		CT ,08116	*
(Но	me Address of Company)		
Americold has issued to Transportation Services		eniake Parkway, Suite 800 S	South
(Name of Motor Ca		a .GA .30328 (Address of Motor Carrier)	
A policy or policies of insurance effective from policy or policies and continuing until cancelled Damage Liability insurance Endorsement, has o covering the obligations imposed upon such mo regulations promulgated in accordance therewit	as provided herein, which by or have been amended to pro- tor carrier by the provisions o	vide automobile bodily injury and pro	rrier Bodily Injury and Prope perty damage llability insura
Whenever requested, the Company agree This cartificate and the endorsement deso cancellation may be effective by the Company o commance to run from the date notice is actuall	ribed herein may not be cand in the insured giving thirty (30	elled without cancellation of the policy days' notice in writing to the State A	by to which it is attached. Su
Countersigned at		This 29th	day of
	(Address)	(Day)	(Month) (Yes
			The same of the same of the same
Insurance Company File No. 20CSES1230	(Palicy No)		mpany Representative)

Underlying Limit :0:00

Liability Limit :2,000,000.00

7113 JAN 30 AN 11: L