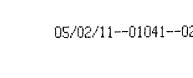
M110000002563

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer.	
<u> </u>	•	

Office Use Only





400206939624

05/02/11--01041--023 **160.00

J. SAULSBERRY **EXAMINER**

MAY 19 2011

COVER LETTER

	istration Section sion of Corporations		·	
SUBJECT:	SDI Florida LLC.			
	N.	ame of Limited Liability Com	pany	
	"Application by Foreign Limited Lik d check are submitted to register the			
Please return	all correspondence concerning this n	natter to the following:		
	Richard Ganson			
		Name of Person	All the second s	M
	SDI Florida LLC.			
		Firm/Company		-
	1711 Wells Road			
		Address		9-9-9-
	Orange Park, Florida 32	2073		
		City/State and Zip Code		aven.
	feedback@sonicknov	wsjax.net		مات
		(to be used for future annual r	eport notification)	20 SE
For further in	formation concerning this matter, ple	rase call:	. [SECRETARY:
Ric	k Ganson	at (904	, 487-4789 Š	MAY 19 PM 3
-	Name of Person	Area Code & Daytime		
Divis Regi P.O.	ILING ADDRESS: ston of Corporations stration Section Box 6327 thassec, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2664 Executive Center Cir		PN 3: 58
- *****		Tallahassee, FL 32301	•••	
	a check for the following amo .00 Filing Fee \$\int\\$	ce & [7]\$155.00 Filing Fee	& [7\$160.00 Filing Fee, Certified Co	ficate py

To:

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

SDI Florida LLC.	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company." "L.L.C.," or	'LLC.")
SDI Kestaurant Complec	
If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach	
onsent of the managers or managing members adopting the alternate name. The alternate name must include "L company," "L.E.C." "L.C.")	imited Liability
Delaware 3, 45-1769094 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
. <u>5/4/11</u> <u>5. perpetual</u>	
(Date of Organization) (Daration: Year limited liability company vexist or "perpetual")	vill cease to
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
ATAA MANDO Doord	₹ S 25
1711 Wells Road	- 등의 - =
Orange Park, Florida 32073	
(Street Address of Principal Office)	19
1605-2-17-605	
If limited liability company is a manager-managed company, check here	
. The name and usual business addresses of the managing members or managers are as follo	္လင္ဆိုင္ဆိုင္သမွ် လည္တိုင္ဆိုင္သမွ်
Richard Ganson - 1711 Wells Road, Orange Park, FL 32073	58 58
Andrew Hubregsen - 1711 Wells Road, Orange Park, FL 32073	
Michael Bonnet - 1711 Wells Road, Orange Park, FL 32073	
0. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having	
e jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign	Austrody of records in Iomorunoe a
anslation of the certificate under outh of the translator must be submitted.)	un iguaga, a
1. Naturn of hispinass or numbers to be conducted as appropriated in Thesia.	
Nature of business or purposes to be conducted or promoted in Florida:	
Sonic Drive-in Restaurants	*
(Sila Vyanson)	
Signature of a member or an authorized representative of a member.	
(In accordance with section 608.408(3). f.S., the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true. I am aware that any false information submitted	r the
document to the Department of State constitutes a third degree felony as provided for in s.817.1	to in a 55, F.S.)
Richard Ganson	• •

Typed or printed name of signce

To:

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Fax: +1 (850) 245-6030

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Lin	nited Liability Com	npany is:	
SDI Florida LLC) .		
If unavailable, the alter			
SDI Kesta	urant Gr	nup L LC	
			
2. The name and the F	lorida street address	s of the registered agent and office are	:
Richar	d Ganson	•	# 2
		(Name)	2011 MAY 19 SECRETAR ALLANASS
1711	Wells Road		ZZ :
	Florida Street Ad	ddress (P.O. Box NOT ACCEPTABLE)	
Oran	ge Park,	_{Fi.} 32073	PH 3: 58 FLORID
ज्याप कर व्यवस्थान ।	<u> </u>	City/State/Zip	25 5

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SDI FLORIDA 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 SEVENTEENTH DAY OF MAY, A.D. 2011.

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

4969528 8300

110559674

Jeffrey W. Bullock, Secretary of State AUTHENTACATION: 8768022

DATE: 05-17-11

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

To:

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that we are the Managers and/or Managing		
Members of SDI FLURIDA LLC	•	
(Name of Limited Liability Company)		
a limited liability company duly organized and existing under the laws of		
(State or Compry of Organization)		
Because the name of this foreign limited liability company does not satisfy the		
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the		
following name to transact business in the state of Florida:		
SDI RESTAURANT GROUP LLC		
(Name to be used by limited limitity company in Plorids: NOTE: Name must and with Limited Liability Company, L.L.C., or LLC.)		
Date: 5-19-11		
Signature(s) of Manager(s) and/or Managing Member(s):	201	
K A Conson	MAY	7
SSA	Y 19	
	1	
	PH 3:	
	CT	
	C C	
		•

CR2E122 (7/07)