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Office Use Only



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### **COVER LETTER**

Division of Corporations	
SUBJECT: McClain Sonics, In	nc.  f corporation - must include suffix
	, corporation made morage burns.
Dear Sir or Madam:	
	rporation for Authorization to Transact Business in Florida," of Good Standing" and check are submitted to register the ansact business in Florida.
Please return all correspondence concernin	ng this matter to the following:
R. Clark Spencer	
	Name of Person
McClain Sonics, Inc.	
	Firm/Company
425 Christine Drive	, , , , , , , , , , , , , , , , , , ,
and the second second	Address
Ridgeland, MS 39157	
	City/State and Zip code
clark_spencer@mcclainsonics.	com
E-mail address:	com  (to be used for future annual report notification)  atter, please call:
For further information concerning this ma	atter, please call:
	601 049 3101 E.C. E.
	at (001 ) 940-3101 SS
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS:  New Filing Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314
Enclosed is a check for the following amo	eunt:
\$70.00 Filing Fee \$78.75 Filing Certificate o	

### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

1. McClain Soni	cs, Inc. orporation; must include "INCORPORATED	" "COMPANY " "CORPORATION."
	orp," "Inc," "Co," or "Corp.")	COMPANY, CONFORMION,
(If name unavails	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)
Mississippi	3.	64-0933379
·	under the law of which it is incorporated)	(FEI number, if applicable)
4/4/2000	5.	
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
j		
		in Florida, if prior to registration) 502, F.S., to determine penalty liability)
. 425 Christii	ne Drive, Ridgeland, MS 3915	57
	(Principal office add	iress)
P.O. Box 2	2128, Ridgeland, MS 39158	
	(Current mailing ad	dress)
<sub>s</sub> managing	fast food restaurants	
· · <del>- · · · · · · · · · · · · · · · · ·</del>	s) of corporation authorized in home state or c	ountry to be carried out in state of Florida)
). Name and stree	et address of Florida registered agent: (P.	O. Box NOT acceptable)
Name:	Robert F. Greene	
Office Address:	601 12th Street West	FO
	Bradenton	
	(City)	(Zip code)
10. Registered as	gent's acceptance:	
Having been nan	ned as registered agent and to accept serv	ice of process for the above stated corporation at the place
		ment as registered agent and agree to act in this capacity. relative to the proper and complete performance of my dut.
ınd I am familiai	with and accept the obligations of my p	osition as registered agent.
/		
(	tolor the	_
-	(Registered agent's signature	

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Ronald G. McClain Address: 425 Christine Drive, Ridgeland, MS 39157 Vice Chairman: Director: R. Bruce Vaughn Address: 425 Christine Drive, Ridgeland, MS 39157 **B. OFFICERS** President: Ronald G. McClain Address: 425 Christine Drive, Ridgeland, MS 39157 Vice President: Secretary: A. Bruce Vaughn Address: 425 Christine Drive, Ridgeland, MS 39157 Treasurer: R. Clark Spencer Address: 425 Christine Drive, Ridgeland, MS 39157 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. 14. R. Clark Spencer, Treasurer

## State of Mississippi

### Office of the Secretary of State C. Delbert Hosemann, Jr., Secretary of State Jackson, Mississippi

#### **CERTIFICATE**

I, C. DELBERT HOSEMANN, JR., Secretary of State of the State of Mississippi, and as such, the legal custodian of the corporate records, required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on April 4, 2000, the State of Mississippi issued a Charter/Certificate of Authority to:

MCCLAIN SONICS, INC.

That the state of incorporation is MISSISSIPPI.

That the period of duration is perpetual.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State.

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.

SERVER SE

Given under my hand and seal of office December 9, 2010

C. Delbert Hosemann, Jr. Secretary of State

Certification Number: 12304359-1 Page 1 of 1 Reference: jc Verify this certificate online at https://business.sos.state.ms.us/corp/soskb/verify.asp