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#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

January 10, 2005

DAVID DINGUS P.O. BOX 485-535 HAVDEEVILLE, SC 29927

SUBJECT: LOWCOUNTRY PAVER, LLC

Ref. Number: W05000001302

We have received your document for LOWCOUNTRY PAVER, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Document Specialist

SECRETARY OF STATE

Letter Number: 405A00001669

#### TRANSMITTAL LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: Lowcountry Block, LC	dbx Lowcountry PAVER		
SUBJECT: Lowcountry Block, LC dbx Lowcountry PAVER (Name of Limited Liability Company)			
The enclosed "Application by Foreign Limited Liabiliforida," Certificate of Existence, and check are submitability company to transact business in Florida			
Please return all correspondence concerning this matt	er to the following:		
DAVID R.T	DINGUS of Person)		
Low country (Film)	Block, LLC Company)		
P.O. Box 485	- 535 Stiney ROAD ddress)	<u>&gt;</u>	
HANDER VILLE SC (City/State	29927 and Zip Code)		
For further information concerning this matter, please			
To leader information concerning this matter, please	, can.	200 7.51	
	at (843) 784-7104	ZOOS JAN 18 SECRETERY	
(Name of Person)	(Area Code & Daytime Telephone Nun		
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, Florida 32314	JAN 18 AM 8: 28 CRETERY OF STATE AND SEE, FLORIDA	
Enclosed is a check for the following amount:			
☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Sta	□ \$155.00 Filing Fee & \$160.00 Filing Fee atus Certified Copy of Status	e, Certificate & Certified Copy	

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: lame of Foreign Limited Liability Company) Jurisdiction under the law of which foreign limited liability company is organized) (Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 535 Stirry ROAD (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: P.O. BOX 485 HAr Deeville, SC 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having ensubdy office ords in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: 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 the penalties of perjury that the facts stated herein are true.) ZAMON

Typed or printed name of signer

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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 Limited Liability Company is:

2. The name and the Florida street address of the registered agent and office are:
CT Corporation System
1200 South Pine ISLAND Rd. Florida Street Address (P.O. Box NOT ACCEPTABLE)
Plantation FL 33324
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.
PETER F. SOUZA ASSISTANT SECRETARY  (Signature)  ASSISTANT SECRETARY  ASSISTANT SECRETARY  ASSISTANT SECRETARY  ASSISTANT SECRETARY
\$ 100.00 Filing Fee for Application

\$ 25.00

\$ 30.00

5.00

Designation of Registered Agent

Certificate of Status (optional)

Certified Copy (optional)

## The State of South Carolina



Office of Secretary of State Mark Hammond

### **Certificate of Existence**

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

LOWCOUNTRY BLOCK, LLC, A Limited Liability Company duly organized under the laws of the State of South Carolina on April 9th, 2001, with a duration that is at will, has as of this date filed all reports due this office, including its most recent annual report as required by section 33-44-211, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to section 33-44-809 of the South Carolina Code, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 7th day of October, 2004.

Mark Hammond

Mark Hammond, Secretary of State