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#### TRANSMITTAL LETTER

	egistration Section vivision of Corporations		
SUBJEC	T: SDI of Wauchula, LLC		
SCEC		mited Liability Company)	
Florida,"		Liability Company for Authorization to Transact Busines submitted to register the above referenced foreign limite	
Please re	turn all correspondence concerning this	matter to the following:	
	Sharon Clark		
		Name of Person)	
	Brunini, Grantham, Grower & Hewes, P	LLC	
	(	Firm/Company)	
	Post Office Drawer 119		
		(Address)	
	·		
	Jackson, MS 39205	(Chata and Zin Coda)	
	City	State and Zip Code)	
For furth	ner information concerning this matter,	please call:	
•	Sharon Clark	at ( 601 ) 973-8706	
_	(Name of Person)	(Area Code & Daytime Telephone Number)	
S	STREET ADDRESS:	MAILING ADDRESS:	
F	Registration Section	Registration Section	
Division of Corporations		Division of Corporations	
409 E. Gaines Street		P.O. Box 6327	
7	Tallahassee, Florida 32399	Tallahassee, Florida 32314	
Enclose	d is a check for the following amount:		
1	□ \$125.00 Filing Fee	& □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate of Status Certified Copy of Status & Certified	

### 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 of Wauchula, LLC	· · · · · · · · · · · · · · · · · · ·	
(Name of Foreign Limited L	iability Company)	
Mississippi 3		
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)	<del></del>
March 10, 2005 5	Perpetual	
(Date of Organization)	(Duration: Year limited liability company will cease exist or "perpetual")	se to
		<del></del>
(Date first transacted business in Flo (See sections 608.501 & 608.502 F.S.	orida, if prior to registration.) to determine penalty liability)	
425 Christine Drive		
Ridgeland, MS 39157		
(Street Address	of Principal Office)	0
. If limited liability company is a manager-managed	company, check here	05 APR 22
. The name and usual business addresses of the man	aging members or managers are as follows:	22
Ronald G. McClain, Post Office Box 2128, Ridgeland,	MS 39158	
	:	$\ddot{\omega}$
	3*	
	33	
<ol> <li>Attached is an original certificate of existence, no more than 90 or rejurisdiction under the law of which it is organized. (A photocop anslation of the certificate under oath of the translator must be subremed.</li> </ol>	y is not acceptable. If the certificate is in a foreign langua	
1. Nature of business or purposes to be conducted or	r promoted in Florida: own and operate restaur	ants_
Ronald I. D.	y: Clan.	
	othorized representative of a member.  T.S., the execution of this document constitutes into the facts stated herein are true.)	
Ronald G. McClain		

Typed or printed name of signee

## 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 Con	npany is:	
SDI of Wauchi	ula, LLC		
2. The name	and the Florida street address	ss of the registered agent and office are:	:
	Curtis Hare		
		(Name)	<del></del>
	2721 Huntington Avenue		
	Florida Street A	address (P.O. Box <u>NOT</u> ACCEPTABLE)	
	Sarasota	FL 34232	
		City/State/Zip	
liability compagent and agr relating to the	rany at the place designated in ree to act in this capucity. I fu e proper and complete perform	nd to accept service of process for the abo in this certificate, I hereby accept the appo in ther agree to comply with the provision mance of my duties, and I am familiar with tent as provided for in Chapter 608, Flori	ointment as registered as of all statutes th and accept the

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

## State of Mississippi

#### Office of the Secretary of State Eric Clark, Secretary of State Jackson, Mississippi

#### CERTIFICATE

I, ERIC CLARK, Secretary of State of the State of Mississippi, and as such the legal custodian of the records as required by The Mississippi Limited Liability Company Act to be filed in my office do hereby certify that:

SDI OF WAUCHULA, LLC

Formed March 10, 2005

A Mississippi Limited Liability Company has filed the necessary documents in this office and has obtained a certificate of formation under the provisions of The Mississippi Limited Liability Company Act as shown by the records in this office.

That the registered office of said Limited Liability Company is located at:

425 CHRISTINE DRIVE PO BOX 2128 RIDGELAND MS 39158

and that the registered agent at that address is:

MCCLAIN, RONALD G

I further certify that said Limited Liability Company has paid the fees for filing the above papers required by law as shown by the records of this office and that said Limited Liability Company is in good standing to do business in Mississippi at this time.

Given under my hand and seal of office April 4, 2005

Tric Clark

ERIC CLARK Secretary of State

Certification Number: 7078314-1 Page I of 1 Reference: BS- Sharon Clark Verify this certificate online at http://www.sos.state.ms.us/busserv/corp/verify