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SECRETARY OF STATE TALLAHASSEE, FLORID

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### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: SDI of Boynton Beach, LLC (Name of Limit	ited Liability Company)
<del>-</del>	bility Company for Authorization to Transact Business in bmitted to register the above referenced foreign limited
Please return all correspondence concerning this m	atter to the following:
Sharon Clark	
(Na	me of Person)
Brunini, Grantham, Grower	& Hewes, PLLC
(Fir	m/Company)
Post Office Drawer 119	& Hewes, PLLC  SECRETARY OF STATE  (Address)
	(Address)
Jackson, MS 39205	
(City/Sta	ate and Zip Code)
For further information concerning this matter, ple	ase call:
Sharon Clark	at ( 601 ) 973-8706
(Name of Person)	(Area Code & Daytime Telephone Number)
MAILING ADDRESS:	STREET ADDRESS:
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building 2661 Executive Center Circle
Tallahassee, FL 32314	Tallahassee, FL 32301
Enclosed is a check for the following amount:  \$\Bigsim \mathbb{\text{\$125.00 Filing Fee}} \Bigsim \mathbb{\text{\$130.00 Filing Fee}} \& \text{Certificate of} \end{array}	□\$155.00 Filing Fee & □\$160.00 Filing Fee, Certificate  Status Certified Copy of Status & 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:

1. SDI of Boynton Beach, LLC	
(Name of Foreign Limited	Liability Company)
<sub>2.</sub> Mississippi	3
(Jurisdiction under the law of which foreign limited liability company is organized)	( FEI number, if applicable)
4 June 9, 2006	<sub>5.</sub> Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6.	
(Date first transacted business in F (See sections 608.501 & 608.502 F.	Florida, if prior to registration.) S. to determine penalty liability)
7. 425 Christine Drive	2007 TALL
Ridgeland, MS 39157	CRET LAH.
(Street Addres	ss of Principal Office)
8. If limited liability company is a manager-manage	ed company, check here  anaging members or managers are as follows:
9. The name and usual business addresses of the ma	anaging members or managers are as follows:
Ronald G. McClain, Post Office 2128, Rid	geland MS 39158
Tronala G. Mediani, i est omee 2120, iva	gerand, inc do rec
<del></del>	
10 Am 1 12 27 1 27 4 6 24	
the jurisdiction under the law of which it is organized. (A photoco	O days old, duly authenticated by the official having custody of records in one is not acceptable. If the certificate is in a foreign language, a
translation of the certificate under oath of the translator must be su	••
11. Nature of business or purposes to be conducted	or promoted in Florida: own and operate
restaurants	
Rober W.	(Vainte
	authorized representative of a member.
· · · · · · · · · · · · · · · · · · ·	y, F.S., the execution of this document constitutes erjury that the facts stated herein are true.)

Robert D. Drinkwater, Authorized Representative

Typed or printed name of signee

# 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 BOYNTON BEACH, LLC

Formed June 9, 2006

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 DR, PO BOX 2128 RIDGELAND MS 39158

and that the registered agent at that address is:

RONALD G MCCLAIN

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 January 26, 2007

rie (lack)

ERIC CLARK Secretary of State

Certification Number: 8731723-1 Page 1 of 1 Reference: Verify this certificate online at http://www.sos.state.ms.us/busserv/corp/verify

## CERTIFICATE OF DESIGNATION OF

REGISTERED AGENT/REGISTERED	) OFFICE
PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.50 UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGPLORIDA.	FOLLOWING STATEMENT
1. The name of the Limited Liability Company is:	
SDI of Boynton Beach, LLC	
2. The name and the Florida street address of the registered agent and	d office are:
Curtis Hare	
(Name)	
2721 Huntington Avenue	
Florida Street Address (P.O. Box NOT ACCEPTA	LBLE)
Sarasota FL 34232	
City/State/Zip	
Having been named as registered agent and to accept service of process liability company at the place designated in this certificate, I hereby acc agent and agree to act in this capacity. I further agree to comply with the relating to the proper and complete performance of my duties, and I am obligations of my position as registered agent as provided for in Chapte	cept the appointment as registered he provisions of all statutes familiar with and accept the
(Signature)  \$ 100.00 Filing Fee for Applica	
\$ 25.00 Designation of Registre \$ 30.00 Certified Copy (option \$ 5.00 Certificate of Status (o	nal) 5 m