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# Florida Department of State

Division of Corporations Public Access System

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## FLORIDA/FOREIGN LIMITED LIABILITY CO.

CASI ACQUISITION COMPANY, LLC

| Certificate of Status | 0        |
|-----------------------|----------|
| Certified Copy        | 0        |
| Page Count            | 04       |
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FFB 2 9 2008

2/28/2008

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

IN COMPLIANCE WITH SECTION 608503, PLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A POREIGN

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: CASI ACQUISITION COMPANY, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Plorida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Limitity Company," "L.L.C.," "LLC.") 2. DELAWARE

|      | company is organized)  |              | ( ) to manny in Apparation  |       |  |  |
|------|--|--------------|---|-------|--|--|
| 4    | FBBRUARY 21, 2008  | 5.           | PERPETUAL   |       |  |  |
| - 41 | (Date of Organization)   | ٠.           | (Duration: Year limited liability company will cease to exist or "perpenual") |       |  |  |
| 6,   |  |              |   |       |  |  |
|      | (Date first mansacted business in F<br>(See sections 608.501 & 608.502 F.) | lari<br>S. t | da, if prior to registration.)"  determine penalty liability)                 |       |  |  |
| 7.   | 40 BURTON HILLS BLVD., SUITE 420   |              |   |       |  |  |
|      | NASHIVILLE, TN 37215   |              |   |       |  |  |
|      | (Street Address  | <b>3</b> O   | Principal Office)   |       |  |  |
| 8.   | . If limited liability company is a manager-managed company, check here    |              |   |       |  |  |
| 9.   | The name and usual business addresses of the man                           | ប្រគរ្       | ring members or managers are as follows:                                      |       |  |  |
|      | Barney Ryrd 40 Burto   | ٥            | Hills Blvd., STE 420. Nashville, TN 37  | '215· |  |  |

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records 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:

FOOD AND SUNDRIES DISTRIBUTION

Signature of a member or an authorized representative of a member. (In accordance with section/606.408(3), F.S., the execution of this document constitutes an affirmation under the panalties of perjury that the facia stated herein are true.)

BARNEY BYRD, Member Typed or printed name of signee

\$1.017 - 05/28/2007 C T \$years Delline

# 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 Comp        | pany is:             |                       |  |  |
|--|----------------------|-----------------------|--|--|
| CASI ACQUISI                                     | ITION COMPANY, I     | rrc                   |  |  |
| If name unavailable, the alternate name to b     | be used in the state | e of Florida is:      |  |  |
| 2. The name and the Florida street address       | of the registered    | agent and office are: |  |  |
| C T Corporation System                           |                      |                       |  |  |
|  | (Name)               |                       |  |  |
| 1200   | South Pine Island Ro | nad                   |  |  |
| Florida Street Address (P.O. Box NOT ACCEPTABLE) |                      |                       |  |  |
| Plantation                                       | 1731                 | 33324                 |  |  |
|  | City/State/Zip       |                       |  |  |

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.

By: The Market Hardley Asst. Secretary
(Signature)

\$ 100.00 Filing Pee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional) OR FER 28 AM 8: 15

# Delaware

DACR 1

### The First State

I. HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CASI ACQUISITION COMPANY, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAMARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SECOND DAY OF FEBRUARY, A.D. 2008.

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

4507991 8300

080205366

You may varify this certificate calis at corp.dolastre.gov/authrer.shtml Varnet Smile Hinden

Harrier Smith Windsor, Secretary of S

AUTHENTICATION: 6400396

DATE: 02-22-08