Division of Corporations Electronic Filing Cover Sheet

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(((H11000011599 3)))



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ACCOUNT Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

(850)222-1092

Phone Fax Number

: (850)878-5368

L. SELLERS

JAN 1.4 2011

**EXAMINER** 

\*\*Enter the email address for this business entity to be used for future annual report muilings. Enter only one email address please. \*\*

Email 1	iddress:			

### Foreign Limited Liability Company DG Raiford, LLC

Certificate of Status Certified Copy Page Count 05 Estimated Charge \$125.00

Electronic Filing Menu Corporate Filing Menu

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### COVER LETTER

	stration Section sion of Corporations	
SUBJECT:	DG R	aiford, LLC
•	7	lame of Limited Liability Company
Existence, an	"Application by Foreign Limited Lid check are submitted to register the all correspondence concerning this	lability Company for Authorization to Transact Business in Florida," Certificate of above referenced foreign limited liability company to transact business in Florida
	Tricia Carter	
		Name of Person
	Kleinpeter & Kleic	npeter
		Firm/Company
	M411 as a se	
	7644 Old Ham	mond Highway
		Address
	Baton Rouge, LA	70809
		City/State and Zip Code
	tricia@kleinpeter-law	z eam
		(to be used for future annual report notification)
For further in	formation concoming this matter, p	iones call:
• • • • • • • • • • • • • • • • • • • •	· · · · · · · · · · · · · · · · · · ·	
Tricie	Certer	at ( 225 ) 926~5093
	Name of Person	Area Code & Daytime Telephone Number
	ILING ADDRESS:	STREET ADDRESS:
	sion of Corporations stration Section	Division of Corporations Registration Section
	Box 6327	Clifton Building
	shassee, FL 32314	2661 Exocutive Center Circle Tallahassee, FL 32301
	s a check for the following am 5.00 Filing Fee 5.30.00 Filing Certificate of \$	Fee & 75155.00 Filling Fee & 75160.00 Filing Fee, Continuate

11 JAN 13 AM 10: 50

# 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;

DG Redford. LLC     Name of Foreign Limited Liability Company; must include	te "Limited Liability Company," "L.L.C. " or "L.L.C.")
	c of transacting business in Florida and anach a copy of the writer
Louisiana (Jurisdiction under the law of which foreign himfod liability company is organized)	(FEI number, if applicable)
4. 1/6/11 5	Perpecual (Duration: Year limited liability company will cease to exist or "purpecual")
6. 1/6/11 (Date first transacted business in Flo (See sections 608.501 & 608.502 F.S.	rida, if prior to registration.) to determine penalty flability)
7. 7638 Old Hammond Highway, Baton B	touge, LA 70809
8. If timited liability company is a manager-managed 9. The name and usual business addresses of the manager, 7638 Old Richard M. Hill, Manager, 7638 Old	<del>-</del>
10. Atteched is an original certificate of existence, no monathra 900	tays old, duly authenticated by the official having custody of records in
the jurisdiction under the law of which it is organized. (A photocopy translation of the certificate under outh of the translator must be subm	y is not acceptable. If the certificate is in a foreign language, a
11. Nature of business or purposes to be conducted or	promoted in Florida:
	vestment .
Thistar V	M. Anil
Signature of a member of an au (In accordance with section 60% 100%). Fig. We end penalties of perjury that the liters stated herein are tre	Inprized representative of a member.  Inprized representative of a member.  In a second of the secon
Richard M Hill	
Typed or neinted	name of siones

MENANT THE STA

/LED) - (@4) 9018 CT Pyres Office

## 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.

f unavailable, ti	e alternate to be used in the state of Florida is:
·	
The name an	the Florida street address of the registered agent and office are:
THE DAINE BU	the Francia spect address of the registered agent and office are:
1	T Corporation System
	T' Corporation System (Name)
	<u> </u>
	(Name)
	(Name) 200 South Pine Island Road

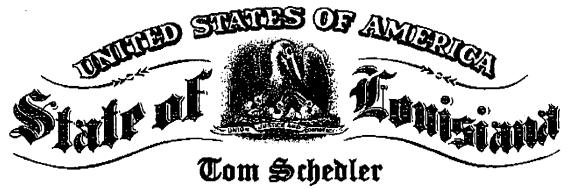
fluving been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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.

ty: Stephanie Allison

Asst. Vice President

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

FURY 1003/2010/CT/Nysami Online



SECRETARY OF STATE

As Scorotary of State, of the State of Louisiana I do hereby Certify that

#### DG RAIFORD, LLC

A limited liability company domiciled in BATON ROUGE, LOUISIANA,

Filed charter and qualified to do business in this State on January 06, 2011,

I further certify that the records of this Office indicate the company has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned, is in good standing and is authorized to do business in this State.

I turther certify that this certificate is not intended to reflect the financial condition of this company since this information is not available from the records of this Office.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

JIMUUULL Secretary of State

January 13, 2011

Certificate ID: 10132078#LUL73

To validate this certificate, visit the following web site, go to Commercial Division, Certificate Validation, then follow the instructions displayed.

www.sos.louisiana.gov

Web GSC