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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 10, 2016

ROBERT C. BASS 201 SOUTH SPRING STREET, SEVENTH FLOOR TUPELO, MS 38804

SUBJECT: L.D. HANCOCK COMPANY, LLC

Ref. Number: W16000055554

We have received your document for L.D. HANCOCK COMPANY, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

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) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 916A00016930

COVER LETTER

	Registration Section Division of Corporati	ons						
SUBJEC	L. D. Hancock Co	mpany, LLC						
30110110	· · ·	Name o	f Limited Liability	Company				
Existence	e, and check are submit	oreign Limited Liability Conted to register the above refe	renced foreign lim					
riease rei	iurn an correspondence	concerning this matter to the	e tottowing:					
	Robert C. Bas	ss						
		1	Vame of Person					
	Phelps Dunba	r LLP						
		E	Firm/Company				ಹ	
	201 South Spi	ring Street, Seventh Floor				E CHI	2	Π
	Address 22							
	Tupelo, MS 3	8804					29 PH 4:	ILED
		City/\$	State and Zip Code			一层台	-ET	
	caitlin.burcham	@phelps.com				高品	30	
		E-mail address: (to be use	d for future annual	report not	tification)			
For furthe	r information concerni	ng this matter, please call:						
Robert C. Bass		662 at (842-79	07				
_	Name	of Contact Person	Area Code	Day	time Telephone Numbe	r		
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrati Clifton B 2661 Exe	TADDRESS: of Corporations ion Section wilding centive Center Circle see, FL 32301				
	is a check for the follow ■ \$125.00 Filing Fee	ving amount: \$\text{\text{\$\ext{\$\text{\$\}}}}}\$}\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\}\$}}}\$}\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\}}}}}\$}	□ \$155.00 Filin Certified Copy	ig Fee &	☐ \$160.00 Filing Fee of Status & Certified (:	

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

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

L. D. Hancock Compa	USINESS IN 111E, STATE OF FLORI inv. 1 1 C	<i>)</i> 4;		
	reign Limited Liability Company; n	ust include "Limited Liability (Company," "L.L.C.," or "I	LC.")
(If name unavailable, enter a Liability Company," "L.IC,	alternate name adopted for the purp ," or "LLC.")	ose of transacting business in Fl	orida. The alternate name	must include "Limited
2. Mississippi		3.		
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FF	I number, if applicable)	
4				
	(Date first transacted busi (See sections 605.0904 & 60	ness in Florida, if prior to regist 05.0905, F.S. to determine penal	ration.) ty liability)	
5. 509 South Thomas Str	reet			
Tupelo, MS 38802				
	(Street Address o	f Principal Office)		
6. P.O. Box 3812				-don 75
Tupelo, MS 38802				
	(Mailing	g Address)		一 超 6
7. Name and street addres	ss of Florida registered agent: (ANG 29 P
Name:	C T Corporation System	<u> </u>		NIG 29 PH 4: 30
Office Address:	1200 South Pine Island Road			55 F.
	Plantation	, Flo	rida 33324	
	(City)	,	(Zip code)	
designated in this application complywith the provision	gistered agent and to accept se tion, I hereby accept the appoir ons of all statutes relative to th my position as registered agent.	ntment as registered agent a e proper and complete perfo	nd agree to act in this c rmance of my duties, a	capacity. I further agree
	(Regis	stered agent'Aissistant S	Secretary	
8. The name, title or capa	ncity and address of the person(s) who has/have authority to t	nanage is/are:	
Billy H. Haygood , Ma j	nager			
509 South Thomas Street				
Tupelo, MS 38802				
	of existence, no more than 90 d of which it is organized. (If the abmitted)			
•	Kall L	-		
	Signatur	e of an authorized person		
	in accordance with section 605, the Department of State constit			
	Robert C. Bass, Attorney in Fa	ct		

Typed or printed name of signee





DELBERT HOSEMANN Secretary of State

Office of the Secretary of State Jackson, Mississippi

Certificate of Good Standing

I, C. DELBERT HOSEMANN, JR., 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:

L. D. HANCOCK COMPANY, LLC

Registered the 29th day of December, 2008

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:

509 S Thomas St;P O Box 3812 Tupelo, MS 38802

And that the registered agent at that address is:

Haygood, Billy H

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 the 4th day of August, 2016

C. Delbert Hosemann, Jr. Secretary of State

Certificate Number: CN16026631

Verify this certificate online at http://corp.sos.ms.gov/corpconv/verifycertificate.aspx