

9/7/2016

Division of Corporations

M1600007199

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : DRIVER, MCAFEE, PEEK & HAWTHORNE, P.L.
Account Number : I20020000137
Phone : (904)301-1269
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: jkalata@dmphlaw.com

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**Foreign Limited Liability Company
SDI Aggregates, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

2016 SEP -9 PM 1:19

Electronic Filing Menu

Corporate Filing Menu

Help

SEP 12 2016
J. BRUCE

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**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:

1. SDI Aggregates, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLC.")

2. Delaware

(Jurisdiction under the law of which foreign limited liability company is organized)

3. Applied for

(FEI number, if applicable)

4. _____

(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 200 West Forsyth Street, 12th Floor

Jacksonville, Florida 32202

(Street Address of Principal Office)

6. 200 West Forsyth Street, 12th Floor

Jacksonville, Florida 32202

(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Contoga Business Services, LLC

Office Address: One Independent Drive, Suite 1200

Jacksonville, Florida 32202
(City) (Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

W.M.H.

(Registered agent's signature)

By: William M. Hammill II, Executive Vice President of Contoga Business Services, LLC

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

SDI AGGREGATES HOLDINGS LLC - Manager

200 West Forsyth Street, 12th Floor

Jacksonville, Florida 32202

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

[Signature]
Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in §817.155, F.S.

J. Phillip Gibbs, Authorized Representative

Typed or printed name of signer

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2016 SEP - 3 38
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FLORIDA

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Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SDI AGGREGATES, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SEVENTH DAY OF SEPTEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.



6143731 8300

SR# 20165685754

You may verify this certificate online at corp.delaware.gov/authvar.shtml

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 202948897

Date: 09-07-16

H16000222567 3

09/09/2016 13:16 Driver, McAfee, Peek & Hawthorne

(FAX)8043011278

P.002/004

850-817-8381

9/9/2016 11:28:54 AM PAGE 1/001 Fax Server



September 9, 2016

FLORIDA DEPARTMENT OF STATE

Division of Corporations

DRIVER, MCAFEE, PEEK & HAWTHORNE, P.L.

SUBJECT: SDI AGGREGATES, LLC
REF: W16000061851

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

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.

Stacey M Warren
Regulatory Specialist II

FAX Aud. #: H16000222567
Letter Number: 816A00019135

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P.O BOX 6327 - Tallahassee, Florida 32314