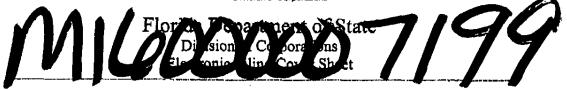
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Division of Corporations



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Foreign Limited Liability Company SDI Aggregates, LLC

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

IN COMPLIANCE WITH SECTION 605.09(2), FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY

SDI Aggregates, LLC	ISINESS IN THE STATE OF FLORIDA			
(Name of For	eign Limited Liability Company; max	st include "Limited Li	ability Company." "L.L.C.," o	r"LLC:")
If name unavailable, enter al	ternate name adopted for the purpos	e of transacting busine	ess in Florida. The alternate na	one must include "Limited
Delaware	•	3. Applied for		
	of which foreign limited liability	J	(FEI number, if applicable	2)
winpany is organizate)				
	(Date lirst transacted busine (See sections 605,0904 & 605.	as in Florida, if prior (o registration.}	_
200 West Forsyth Stre		.uyus, r.a. to octermii	е репаку царику)	
Jacksonville, Florida 3	2202			-
	(Street Address of I	ringipal Office)		_
200 West Forsyth Stree	t, 12th Floor	· · · · · · · · · · · · · · · · · · ·		_
Jacksonville, Florida 3	2202			
	(Mailing A	Address)		_
Name and street address	s of Florida registered agent: (P.	O. Box NOT accep	otable)	
Name:	Contoga Business Services, LL	c	_	hand hand
Office Address:	One Independent Drive, Suite I	200	-	
	Jacksonville		, Florida 32202	_ 88
	(City)		(Zip code)	_ <u>ਨੰ</u> ਨੂੰ ਦ
legistered agent's accep laving been named as re	woes: gistered agent and to accept serv	vice of process for ti	he above stated limited liab	lity daniputy at the place
	tion, I hereby accept the appoint ons of all statutes relative to the p			
	ny position as registered agent.	proper una compres	e bestoumines of 11th mane	ا با کی
	IM21.5			
	(Registr By: William M. Hammill II, Exe	ered agent's signature)	ol of Contage Rusiness Ser	- ∞ ∞
. The name, title or capa	city and address of the person(s)		_	vices, and
	LDINGS LLC - Manager		•	
00 West Forsyth Street,	2th Floor			
acksonville, Florida 3220	2			
AM-1-11				
Attached is a corrilleate risdiction under the law of the translator must be su	of existence, no more than 90 day of which it is organized. (If the co ibmitted)	ys old, duly authenti rtificate is in a forei	cated by the official having gn fanguage, a translation o	custody of records in the fithe certificate under oath
	Signature	of an authorized perso	n	-
is document is executed	in accordance with section 605.0 the Department of State constitut	203 (1) (b). Florida:	Statutes. I am aware that on	y false information
	J. Phillip Gibbs, Authorized Rep		on't as binained int id \$191 \	(TAN) 1.'Ġ!

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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

Authentication: 202948897

Date: 09-07-16

850-817-8381

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September 9, 2016

FLORIDA DEPARTMENT OF STATE

DRIVER, MCAFEE, PEEK & HAWTHORNE, Division of Corporations

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 refax the complete document, including the electronic filing cover sheet.

Pursuant to \$.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. #: #16000222567 Letter Number: 816A00019135