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COVER LETTER

TO: **Registration Section Division of Corporations**

MGD Holdings, L.L.C. SUBJECT:

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Stephen M. Wilson

Name of Person

Bradley Arant Boult Cummings LLP

Firm/Company

188 E. Capitol Street, Suite 400

Address

Jackson, MS 39201

City/State and Zip Code

swilson@bradley.com

E-mail address: (to be used for future annual report notification)

Certified Copy

of Status & Certified Copy

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For further information concerning this matter, please call:

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Stephen M. Wilson		601 59	92-9957	
Name	of Contact Person	Area Code	Daytime Telephone Number	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
Enclosed is a check for the follow	ving amount:			
🗆 \$125.00 Filing Fee	S130.00 Filing Fee &	□ \$155.00 Filing Fee	& X\$160.00 Filing Fee, Certificate	

Certificate of Status

7 - \$/30/2017 Wolters Klower Online

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. MGD Holdings, L.L.C.

ll'unine unavailable, enter alternate i	same adopted for the purpose of transacting business in Flo	rida. The alt	emate name innist include "Limited Lish	ility Company,	" "L.L.C," (or "LLC.
Mississippi		3.	64-0909435			
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	2.	(FEI manb	er, if applicable)	
Upon Filing						
·	(Date fust mansacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determine	registration] ne penalty li	ubility)			
		6.				
(Street Address of Principal Office) 343 Candy Lanc			(Mailing Addr 343 Candy Lane	61S)		
Carson, MS 39427		-	Carson, MS 39427	; • €	25	
. Name and street address	ss of Florida registered agent: (P.O. Box	<u>NOT</u> ac	ceptable)	 ۲۰۰۹ (۲۰۰۹) ۲۰۰۹ (۲۰۰۹)	T SEP	43=14
Name:	C T Corporation System			2.2.38 1.21 - 1.4 1.21 - 1.4	4:	F.
Office Address:	1200 South Pine Island Road			····] · ···	Â	1
	Plantation		, Florida <u>33324</u>		يې	•-
	(City)		(Zip code	<u>, </u>	5	

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.

By:	C T Corporation System (Registered agent		James M. Halpin Assistant Secretary
	and address of the person(s) who	• •	are:
<u>Title or Capacity:</u>	Name and Address:	Title or Capacity:	Name and Address:
Manager, Member	Glynn Dyess		
	343 Candy Lane		
	Curson. MS 39247		

(Use attachments if necessary)

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)

10. 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 s.817.155, F.S.

13 Mm	. Voge	1		
$\overline{\mathcal{T}}$		Signuture of an authorized person	•••	
Glynn	Dye	SS		
		Typed or printed name of signee		•

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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:

MGD HOLDINGS,L.L.C.

Registered the 7th day of May, 1999

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:

343 Candy Lane Carson, MS 39427

And that the registered agent at that address is:

Glynn Dyess

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 13th day of September, 2017

Wellert Nosemann, 1.

C. Delbert Hosemann,]r. Secretary of State

Certificate Number: CN17042227 Verify this certificate online at http://corp.sos.ms.gov/corpconv/verifycertificate.aspx