101000002928

Corporation

ACCOUNT NO. : 072100000032

REFERENCE

530795

7106411

AUTHORIZATION

COST LIMIT

ORDER DATE: December 26, 2001

ORDER TIME: 11:08 AM

ORDER NO. : 530795-010

200004745002--6

CUSTOMER NO: 7106411

CUSTOMER: Mr. Leo Esses

Cohen Tauber Spievack & Wagner

Suite 1903 19th Floor

757 Third Avenue New York, NY 10017

FOREIGN FILINGS

NAME: BEST VALUE FOOD PRODUCTS, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds -- EXT# 1133

EXAMINER:

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

. <u>_</u>	TED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Best Value Food Products, LLC	_
	(Name of foreign limited liability company)	
2. (Jū	I owa irisdiction under the law of which foreign limited liability company is organized) 3	-
£	11/27/01 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")	-
3	upon filing (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)	-
7	5600 1st Avenue	-
	Brooklyn, New York 11220 (Street address of principal office)	-
3. If	f limited liability company is a manager-managed company, check here	
). T	The name and usual business addresses of the managing members or managers are as follows:	01 DEC
_	Best Value Food Products, LLC	_ 🚾
	5600 1st Avenue	31 PM
_	Brooklyn, New York 11220	1:5
		-
t	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of re the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language translation of the certificate under oath of the translator must be submitted.)	ecordsin e, a
1 1.	Nature of business or purposes to be conducted or promoted in Florida: Distribution of	-
_	food products and all other lawful business activities	-
	Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	- -

Adam Stein, Esq.

Typed or printed name of signee

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.

1. The name of	the Limited Liability Compa	any is:				
Best_Va	lue Food Products,	_LLC			· ·	
2. The name an	d the Florida street address o	of the registered	agent and office are	;		
	Corpora	tion Service Co	ompany			
liability compar	Florida street add	FL City/State/Zip) to accept service this certificate, I further a	TACCEPTABLE) 32301 e of process for the a hereby accept the a gree to comply with	ppountient as the provisions of all	01 DEC 31 PM 12: 47	AND
accept the oblig	gations of my position as region	stered agent as p	provided for in Chap	nter 608, F.S.		

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

(Signature)



Date: 12/27/2001

SECRETARY OF STA

490DLC-000259227 BEST VALUE FOOD PRODUCTS , LLC SEARCH NETWORK ARLENE 1501 42ND ST WEST DES MOINES, IA 50266

CERTIFICATE OF EXISTENCE

Name: BEST VALUE FOOD PRODUCTS , LLC

Begin date: 11/27/2001 Expiration: PERPETUAL

I, CHESTER J. CULVER, secretary of state of the state of Iowa, custodian of the records of limited liability companies, certify that the limited liability company named on this certificate was duly organized under the laws of Iowa on the date printed above, that all fees required by the Iowa Limited Liability Company Act have been paid, and that articles of dissolution have not been filed.



CHESTER J. CULVER

SECRETARY OF STATE