

SEP-02-05 03:18PM

FROM-

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Florida Department of State
Division of Corporations
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Electronic Filing Cover Sheet

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((H05000210843 3)))

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To:

Division of Corporations
Fax Number : (850)205-0383

From: Rosa Wong, Paralegal

Account Name : AKERMAN, SENTERFITT & BIDSON, P.A.
Account Number : 075471001363
Phone : (305)374-5600
Fax Number : (305)374-5095

Dear Filing Officer:

Please file the attached Articles of Organization with today's date (9/2/05). Thank you.

05 SEP -2 AM 8:40

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

RECEIVED

05 SEP -2 AM 10:54

DIVISION OF CORPORATIONS

LIMITED LIABILITY COMPANY

ALVALANCHE GROCERS LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

Electronic Filing Manual

Corporate Filing

Public Access Help

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Alvalanche Grocers LLC**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:**Mailing Address:**18770 NE 6th Ave
Miami FL 33179Same**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature**

The name and the Florida street address of the registered agent are:

MADE GOODMAN
Name18770 NE 6th Ave
Florida street address (P.O. Box **NOT** acceptable)Miami FL 33179
City, State, and ZipFILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 SEP - 2 AM 8:40

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.



Registered Agent's Signature

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(CONTINUED)

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ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

MARC GOODMAN
18770 NE 6th Ave
Miami FL 33179

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

 CFO
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

MARC GOODMAN
Typed or printed name of signer

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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