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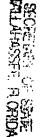
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| TO: | Registration Division of C | | .3 4 | R | ų | Ą |
| SUBJE | CCT: <u>BAY G</u> | Name of L | .imited Liability Compar | ny | | |
| The end | closed Articles | of Organization and fee(s) | are submitted for filing. | | | |
| Please | return all corres | spondence concerning this | matter to the following: | | | |
| | Brandon | A. Young | Name of Person | | | · |
| | | | Name of Person | | | |
| | BAY Gro | cerv Shoppers | Firm/Company | · | · <u>················</u> | |
| | 923 Haw | thorne Street | Address | | | |
| | Tallahass | ee, FL 32308 | | | | |
| | | | City/State and Zip Code | ; | | |
| .ba | stallahassee(| Photmail.com E-mail address: (to be us | sed for future annual rep | ort notifica | ation) | _ |
| For furt | her information | n concerning this matter, pl | ease call: | | | |
| Brando | on Young Nam | at (| (850) 728-98 Area Code D | | lephone Numi | per |
| Enclose | ed is a check for | the following amount: | | | | |
| □ \$125.00 | 9 Filing Fee | ☑\$130.00 Filing Fee & Certificate of Status | Certified Copy (additional copy is e | | Certified | te of Status & |

Mailing Address
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| The name of the Limited Liability Company is: | | 5 MAR |
|--|--|--------|
| BAY Grocery Shoppers LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.") | である。 | (13 PH |
| ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: | SE S | 2: 30 |
| Principal Office Address: Mailing Address: | ** | |
| 923 Hawthome Street Tallahassee, FL 32308 | - | |
| ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: | idual or | |
| Brandon A. Young | | |
| Name | | |
| 923 Hawthorne Street Florida street address (P.O. Box NOT acceptable) | | |
| Tallahassee FL 32308 | | |
| City Zip Having been named as registered agent and to accept service of process for the above stated limited liabil | lta. | |

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 605, F.S..

(CONTINUED)

Page 1 of 2

| ARTICLE IV- The name and address of each person au | thorized to manage and control the Limited Liability Company: |
|--|---|
| <u>Title:</u> "AMBR" = Authorized Member | Name and Address: |
| | |
| "MGR" = Manager MGR | Pronder A. Vouna |
| MCIT | Brandon A. Young 923 Hawthorne Street |
| | Tallahassee, FL 32308 |
| | TOURING SOOD, I L VANCO |
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| (Use attachment if necessary) | |

REQUIRED SIGNATURE:

ARTICLE VI: Other provisions, if any.

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

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

Brandon A. Young
Typed or printed name of signee

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)