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## COVER LETTER

TO:

Registration Section

Division of Corporations
SUBJECT: Victory Lane Food Mat LLC Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jerry D. Dorminey Jr. Name of Person
Panhandle Developers Group, UC
120 Depot Ct. Address
Peaclitree City, Georgia 30269 City State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Michael Dorminey at (770) 302-0004  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)  \$160.00 Filing Fee, Certified Copy (Certified Copy (additional copy is enclosed))
Mailing Address  New Filing Section  Street Address  New Filing Section
Division of Corporations P.O. Box 6327  Division of Corporations Clifton Building
Tallahassee, FL 32314  Tallahassee, FL 32314  2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	15 JUL -9 PH 3:57
Nictory Lane Food Mart, LC. (Must end with the words "Limited Liability Company, "L.L.C.,	ACIRO F FEEL (") LITT
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability	
Principal Office Address:  802   Blowns fown Hwy 120 Tallahassee, Florida Peachtre 32310	Mailing Address: Depot Ct. e Cry, Georgia
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signa (The Limited Liability Company cannot serve as its own Registered Agent. You must another business entity with an active Florida registration.)	
The name and the Florida street address of the registered agent are:    SOURCE   CHANGES     Name   1394   MILLSTAGEM   Pour	
Florida street address (P.O. Box NOT acceptable)  AUAHASSEE, FL 32312  City State	Zip
Having been named as registered agent and to accept service of process for the above staplace designated in this certificate, I hereby accept the appointment as registered agent a further agree to comply with the provisions of all statutes relating to the proper and compare the function of my position as registered agent of provide a function of my position as registered agent of provide Registered Agent's Signature (REQ)	nted limited liability company at the Pod agree to act in this capacity. I plete performance of my duties, and a d for in Chapter 605, F.S
(CONTINUED)	
Page 1 of 2	

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	T. DD . T
<i>NIGR</i>	1882 A. Dohn L. D. Jr.
	500014 GA 30276
MLD	Rustal F. Skalla
MOK	300 Westeran Are.
	Albany, 6A 3172)
CATARTRADO M.C.O	On M. Vannel
COLORADO MON	8813 Saint AndVous Dr.
_	Sandestin, FL 32550
MCR	11 / / / /
11107	8812 Solut Andrew Dr
	Sandestin, FL 30550
	<del></del>
(Use attachment if necessary)	
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f an effective date is listed, the date must be spe te date of filing.) Note: If the date inserted in this block does not m the document's effective date on the Department of	ecific and cannot be more than five business days prior to or 90 days after neet the applicable statutory filing requirements, this date will not be listed
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f an effective date is listed, the date must be specie date of filing.)  Note: If the date inserted in this block does not me he document's effective date on the Department of RTICLE VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a me (In accordance with section constitutes an affirmation I am aware that any false constitutes a third degree of the section of th	mber of an authorized representative of a member.  on 605.0203 (1) (b), Florida Statutes, the execution of this document of under the penalties of perjury that the facts stated herein are true.  information submitted in a document to the Department of State referons as provided for in s.817.155, F.S.)  Dorming Jr.  Typed or printed name of signee  Filing Fees: ganization and Designation of Registered Agent

ARTICLE IV-