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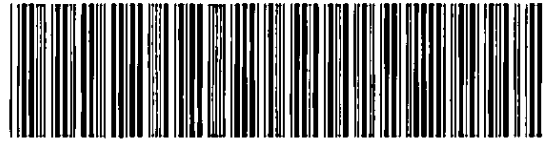
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2022 SEP - 7 PM 3:04  
2022 SEP - 7 PM 3:45  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
K. A. HOSSETT

Mckyson, LLC  
209 E 4<sup>th</sup> St.  
Panama City, FL 32401

September 1, 2022

Secretary of State  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Mckyson, LLC

Dear Sir or Madam:

Enclosed please find the original and one copy of Articles of Organization, together with a check in the amount of \$155.00. This represents the cost of the Filing Fees, Certified Copy of Articles of Organization and Fee for Registered Agent Designation for the above-named organization.

Very truly yours,

A handwritten signature in black ink, appearing to read 'S Chechele', written over the printed name.

Samantha Chechele  
Mckyson, LLC

Enclosures

## **ARTICLES OF ORGANIZATION**

of

**McKySon, LLC**

The undersigned subscriber to these Articles of Organization, a natural person competent to contract, hereby forms a limited liability company under the laws of the State of Florida.

### **ARTICLE I - ORGANIZATION NAME**

The name of the organization is Mckyson, LLC.

### **ARTICLE II - DURATION**

The limited liability company shall exist perpetually unless dissolved according to Florida law.

### **ARTICLE III - PURPOSE**

The limited liability company is organized for the sole purpose of developing, owning, operating, and maintaining Sonic Restaurants, and for all other activities, including ownership of assets, to facilitate this purpose.

### **ARTICLE IV – ORGANIZATION OFFICE**

The organization's principal office address shall be as follows:

209 E 4<sup>th</sup> St.  
Panama City, FL 32401

The organization's mailing address shall be as follows:

209 E 4<sup>th</sup> St.  
Panama City, FL 32401

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**ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT & REGISTERED AGENT'S  
SIGNATURE**

The name and the Florida street address of the Initial Registered Office and Agent of this Organization is:

Amy McMillan  
209 E 4<sup>th</sup> St.  
Panama City, FL 32401

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.

  
**Amy McMillan, Registered Agent**

**ARTICLE VI - MANAGERS**

This organization shall have two (2) managers initially. The number of managers may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial managers of the organization are as follows:

Chris McMillan  
15207 Highway 77  
Panama City, FL 32409

Amy McMillan  
15207 Highway 77  
Panama City, FL 32409

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## ARTICLE VII - SIGNER

The name and address of the person signing these Articles of Organization is as follows:

Samantha Chechele  
7127 1<sup>st</sup> Av S.  
St. Petersburg, FL 33707

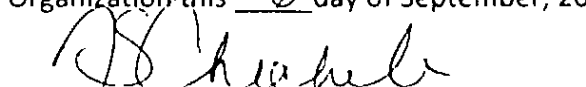
## ARTICLE VIII – TRANSFER RESTRICTION

The company may not issue any additional membership interest and no member may transfer, assign, or pledge any membership interest without the prior, written consent of Sonic Franchising.

## ARTICLE IX – MANAGEMENT

The Limited Liability Company is to be managed by one or more managers who are also members and is, therefore, a member – managed company.

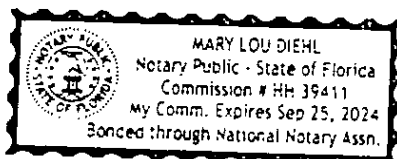
IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Organization this 6 day of September, 2022


  
Samantha Chechele

STATE OF FLORIDA  
COUNTY OF BAY

BEFORE ME, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared Samantha Chechele, known to me to be the person who executed the foregoing Articles of Organization, and who acknowledged before me that she executed these Articles of Organization.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this 6 day of September, 2022



  
Notary Public, State of Florida  
My Commission Expires:

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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