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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

١.	Southern Family Markets of Callaway LLC		
	(Name of Foreign Limited Liability Company)		
2.	Delaware 3.		_
	(Invisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)		_
4.	July 5, 2005 5. Despetual	76	35
	(Date of Organization) (Duration: Year limited liability company we exist or "perpetual")	ill cense to	THE STATE OF
6.	upon qualification		3
•	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	a ^C G	3
7	7 Corporate Drive, Keene, New Hampshire 93431	38	9
		D.E.	36
	(Street Address of Principal Office)	ritor, morpulaire transcerer conserva	÷-
9.	The name and usual business addresses of the managing members or managers are as follows: Southern Family Markets LLC - Member:	~**: 	- -
	7 Corporate Drive, Keens, NH 03431		
ii e	Attached is an original certificate of existence, no more than 90 days old, duly authoriticated by the official having or jurisdiction under the law of which it is organized. (A photocopy is not exceptable. If the certificate is in a foreign instation of the certificate under cath of the translatur must be submitted.) 1. Nature of business or purposes to be conducted or promoted in Florida: any levital act or a	Liginge, a	- xousi
	which a limited liability company can be qualified and retail liquor store		
	Alare Kayley		
	Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), P.S., the execution of this document constitutes an affirmation under the permittes of perjury that the facts stated herein are true.)		
	Merc Toyloy, Authorized Person		
	Tweed or writed name of storms		

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.

. The name of the Limited Liability Company is:	
Southern Family Markets of Callaway LLC	
2. The name and the Florida street address of the registered agent and office are:	05 SEP 30
C T Corporation System	6 G
(Name)	AM 9: 36
1260 South Pins Island Road	99 84 99 84 99
Fiorida Sireei Address (P.O. Box NOT ACCEPTABLE)	DFi 6
Plantation FL 33324	
City/State/Zip	
Having been named as registered agent and to accept service of process for the above sic liability company at the place designated in this certificate, I hereby accept the appointmagent and agree to act in this capacity. I further agree to comply with the provisions of a relating to the proper and complete performance of my duties, and I am familiar with anaphility and position as registered agent as provided for in Chapter 608, Florida Su	erit as registered Af statutes Laccept the
(Signature)	

\$ 100,00 Filing Fee for Application 5 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) 5 5.86 Certificate of Status (optional)



I, HARRIET SMITE WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAMARE, DO HEREBY CERTIFY "SOUTHERN FAMILY MARKETS OF CALLAWAY LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTIETH DAY OF SEPTEMBER, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE MOT BEEN ASSESSED TO DATE.



Varniet Smith Hindrow

3995726 8300

050803403

AUTHENTICATION: 4196255

DATE: 09-30-05