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## FOREIGN LIMITED LIABILITY COMPANY

Southern Family Markets of Pensacola West LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

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

IN COMPLIANCE WITH SPCTION 608-903, FLORIDA STATUTES, THE FOLLOWING IS SUMMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. Southern Family Markets of Pensacola West LLC

	(Name of Foreign Limited Liability Company)	-,1, , ,	-
2.	Delaware 3.		
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)		_
4.	July 5, 2005 5, perpetual		
	(Date of Organization) (Daration: Year limited liability company will cerexist or "perpetual")	asc to	_
6.	upon qualification	05 S	DIVISION
	(Date first transacted business in Florida, if prior to registration.) (See sections 603,501 & 603,502 F.S. to determine penalty liability)	SEP	0X 0
7.	7 Corporate Drive, Keene, New Hampshire 03431	30	E CO
		子	CORPORATIONS
	(Street Address of Principal Office)	<del>i</del>	- ≩5
8.	If limited liability company is a manager-managed company, check here	25	SKS.
9.	The name and usual business addresses of the managing members or managers are as follows:		
	Southern Family Markets LLC - Member		_
	7 Corporate Drive, Kaene, NH 03431		_
			_
ű z	). Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody ejurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign langua instation of the certificate under onth of the translator must be submitted.)		ords in
11	1. Nature of business or purposes to be conducted or promoted in Fiorida: any lawful act or activity	for	-
	which a limited liability company can be qualified and retail liquor store		,1
	Signature of a member or an authorized representative of a member.  (In accordance with section 608.408(3), F.S., the execution of this document constitutes as affirmation under the penaltics of perjury that the facts stated herein are true.)		
	Marc Toyloy, Authorized Person		

Typed or printed name of signee

## 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.

Limited Liability Company i	s:		
kets of Pensacola West LLC			
ne Florida street address of the	e registered	agent and office are;	05 SEP 30 AM 9:
Ç T Corporatio	n System		30 9
			~ ~
1200 South Pine	island Road	Ė	9: 25
Florida Street Address (	P.O. Box NO	I acceptable)	ပေါ
Plantation C	FL ity/State/Zip	38324	
the place designated in this ce act in this capacity. I further a er and complete performance o	rtificate, I h gree to com of my duties,	ereby accept the appointme ply with the provisions of a and I am familiar with and	ent as registered Il statutes I accept the
	tests of Pensacola West LLC  The Florida street address of the CT Corporation  1200 South Pine Florida Street Address (  Plantation  Cas registered agent and to account the place designated in this ce act in this capacity. I further a consistion as registered agent as p	C T Corporation System  (Name)  1200 South Pine Island Road Florida Street Address (P.O. Box 150)  Plantation FL  City/State/Zip  as registered agent and to accept service the place designated in this certificate, I have a provided for and complete performance of my duties, astion as registered agent as provided for	tests of Pensacola West LLC  The Florida street address of the registered agent and office are:  CT Corporation System  (Name)  1200 South Pine Island Road  Florida Street Address (P.O. Box FOT Acceptable)  Plantation FL 33324  City/State/Zip  It is registered agent and to accept service of process for the above state place designated in this certificate, I hereby accept the appointment of the place designated in this certificate, I hereby accept the appointment of the place designated in this certificate, I hereby accept the appointment of the place designated in this certificate, I hereby accept the appointment of the place designated in this certificate, I hereby accept the appointment of the place designated agent as provided for the Chapter 608, Florida Statistica as registered agent as provided for in Chapter 608, Florida Statistica as registered agent as provided for in Chapter 608, Florida Statistical Statist

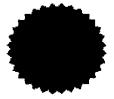
\$	100.00	Filing Fee for Application
.\$	25.00	Designation of Registered Agent
\$	30.00	Certified Copy (optional)
5	5.00	Certificate of Status (optional)



PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SOUTHERN FAMILY MARKETS OF PENSACOLA WEST 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 HERBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.



Warriet Smith Hindson Harrier Smith Windson, Secretary of State

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AUTHENTICATION: 4196283

DATE: 09-30-05