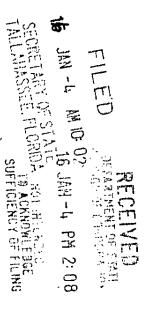


(Re	equestor's Name)			
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PICK-UP	☐ WAIT	MAIL			
(Bu	usiness Entity Na	ame)			
(Document Number)					
Certified Copies	Certificate	es of Status			
Special Instructions to Filing Officer:					
,					

Office Use Only



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JAN 0 5 2016 S. YOUNG CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 926612 77344

AUTHORIZATION : Spelle Bear

COST LIMIT : (\$ 125.00

ORDER DATE: December 22, 2015

ORDER TIME : 9:02 AM

ORDER NO. : 926612-005

CUSTOMER NO: 7734482

FOREIGN FILINGS

NAME: GORDON FOOD SERVICE STORE LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

COVER LETTER

TO:	Registration Section Division of Corporation	ns				
SUBJEC	Gordon Food Servi	ce Store LLC				
0000		Name of	Limited Liability	Company		
The encl Existence	osed "Application by Fo e, and check are submitte	reign Limited Liability Com ed to register the above refer	pany for Authoriza enced foreign limi	ation to Tr ted liabilit	ansact Business in Florid by company to transact bu	la," Certificate of usiness in Florida
Please re	turn all correspondence	concerning this matter to the	following:			
	Cindy Chapma	n, Paralegat				
		N	ame of Person			
	Gordon Food S	Service, Inc.				
	·	F	irm/Company	٠		
	1300 Gezon Pa	ırkway SW				
			Address			
	Wyoming, MI	49509			ja T	SECOLUTION OF THE PROPERTY OF
	•	City/S	tate and Zip Code			量を見る
	beth.ensing@gfs	.com				約35 万 四
	<u> </u>	E-mail address: (to be used	d for future annual	report no	tification)	THE STATE OF
For furth	er information concernin	g this matter, please call:				93 P
	Cindy Chapman, Parale	gal	616 at (717-43	38	हुन ८
	Name o	of Contact Person	Area Code	Day	time Telephone Number	-
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations ion Section uilding cutive Center Circle ice, FL 32301	,
	is a check for the follow ☐ \$125.00 Filing Fee	ing amount: □ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filir Certified Copy		☐ \$160.00 Filing Fee, of Status & Certified C	

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY/TOTRANS/CT BUSINESS IN THE STATE OF FLORIDA:

1. Gordon Food Service S	Store LLC eign Limited Liability Company; must in	oclude *I imited Li	inhility Company " " I . C "	or all Can
(Name of Follows	erga Canteo Clabatty Company, must m	Ciode Linnied Li	naomiy Company, E.E.C.,	or LLC.)
(If name unavailable, enter a Liability Company," "L.L.C,	Iternate name adopted for the purpose of " or "LLC.")	transacting busine	ess in Florida. The alternate r	name must include "Limited
2. Delaware		3. 16-1675916	,	
(Jurisdiction under the law company is organized)	of which foreign limited liability	3.	(FEI number, if applicab	le)
4. January 1, 2016				
	(Date first transacted business in (See sections 605.0904 & 605.090	n Florida, if prior (15, F.S. to determi	to registration.) ne penalty liability)	
5. 1300 Gezon Parkway	sw			
Wyoming, MI 49509				
	(Street Address of Princ	cipal Office)		
6. PO Box 2992				_ 一, 0 流
Grand Rapids, MI 495	01			
	(Mailing Add	ress)		一题是一
7. Name and street addres	s of Florida registered agent: (P.O. 1	Box <u>NOT</u> accep	otable)	温暖を
Name:	Corporation Service Company		_	
Office Address:	1201 Hays Street			夏到 克
	Tallahassee		, Florida	출제 2
	(City)		(Zip code)	_
designated in this applica to complywith the provision	tance: gistered agent and to accept service tion, I hereby accept the appointmen ons of all statutes relative to the proj my position as registered agent.	nt as registered (agent and agree to act in t	this capacity. I further agree ies, and I am familiar with an Courtney Williams
	(Registered	ogent's signature))	Asst. Vice Presiden
8. The name, title or capa	city and address of the person(s) who	o has/have autho	ority to manage is/are:	
Richard J. Wolowski, Ma	nager, 1300 Gezon Parkway SW, Wy	yoming, MI 4950	09	
Jeffrey B. Maddox, Mana	ger, 1300 Gezon Parkway SW, Wyor	ming, MI 49509		
Alisha L. Cieslak, Manag	er, 1300 Gezon Parkway SW, Wyom	ing, MI 49509		
9. Attached is a certificate jurisdiction under the law of the translator must be su	of existence, no more than 90 days of which it is organized. (If the certifiantitled) Signature of a	icate is in a forei	ign language, a translation	g custody of records in the of the certificate under oath
	Signature of a	n authorized perso	on	
This document is executed submitted in a document to	in accordance with section 605.0203 the Department of State constitutes	l (1) (b), Florida a third degree fel	Statutes. I am aware that a lony as provided for in s.8	ny false information 17.155, F.S.
	Jeffrey B. Maddox, Manager and A	_	- *	

Typed or printed name of signee

Page 1

<u>Delaware</u>

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "GORDON FOOD SERVICE STORE 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 FOURTH DAY OF JANUARY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GORDON FOOD SERVICE STORE LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF MAY, A.D. 2003.

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

SECRETARY OF STATE

Authentication: 201603179

Date: 01-04-16

3662284 8300 SR# 20160010037