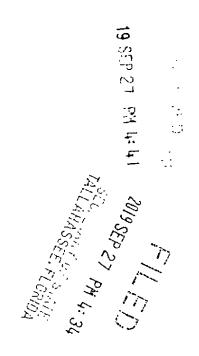
MACCOFFIL

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer					

Office Use Only



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Y SCOTT SEP 3 0 2019



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 936273

7362154

AUTHORIZATION

COST LIMIT

ORDER TIME : 4:18 PM

ORDER NO. : 936273-010

ORDER DATE: September 26, 2019

CUSTOMER NO: 7362154

FOREIGN FILINGS

NAME: DG FRESH DISTRIBUTION

FL, LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT# 62969

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 TOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

I. DG Fresh Distributio	Limited Liability Company; must include "Limit	ed Liability Company," "L.L	.C ," or "LLC.")		
(If name unavailable, enter alternate t	name adopted for the purpose of transacting business in Fl	orida. The alternate name must in	clude "Limited Liability Co.	mpany "Ll	C," or "LLC.
Tennessee 2.		_	Į.	20	
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	3	(FEI mumber, if app		
4	(Date first temperated business in Floods of Logos to	- American Maria	HASS	P 27	-
	(Date first transacted business in Flonda, if prior to (See sections 605,0904 & 605,0905, F.S. to detent	iregistration.) ine penalty liability)	in.	- D	
100 Mission Ridge 5.		(Same)	. FLO	PM 4: 3	
Ostreet Address of	Principal Office)	· —	(Mailing Address)	. ಬ್ರ	
Goodlettsville, TN 3	7072		Dr A	, II	
				-	
					
 Name and <u>street addres</u> 	ss of Florida registered agent: (P.O. Box	(<u>NOT</u> acceptable)			
Name:	Corporation Service Company				
Office Address:	1201 Hays Street				
	Tallahassee	. Florida	32301		
	(City)		(Zip code)		

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Corporation Service Company
By:

(Registered agent's signature)

Roxanne Turner
Asst. Vice President

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]: Title or Capacity: Name and Address: Title or Capacity: Name and Address: Name: Dollar General Corporation Manager Name: _____ Address: ____ ■ Member ☐ Member Address: Goodlettsville, TN 37072 ☐ Authorized Authorized Person Person Other Other____ Other_ Manager Name: ____ ☐ Manager Name: Member Address: ☐ Member Authorized Authorized Person Person Other Other____ Other Other_ Manager Manager Name: _____ Member Address: Member Address: _____ Authorized Authorized Person Person Other__ Other____ Other ___Other_____ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) 10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Kelly Collier, VP, Asst. General Counsel of Dollar General Corporation

Typed or printed name of signee



Division of Business Services Department of State

State of Tennessee 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

BONNY SEXTON BONNY SEXTON 251 LITTLE FALLS DRIVE WILMINGTON, DE 19808

September 27, 2019

Request Type: Certificate of Existence/Authorization Issuance Date: 109/27/201

Request #: 0332146 Copies Requested:

Payment-Credit Card - State Payment Center - CC #: 3766475225

Document Receipt
Filing Fee: \$20,00

Regarding:

DG Fresh Distribution FL, LLC

Filing Type: Limited Liability Company - Domestic

Formation/Qualification Date: 09/24/2019

Status:

Active

Duration Term: Perpetual

Business County: DAVIDSON COUNTY

Control # :

Date Formed:

09/24/2019

Formation Locale: TENNESSEE

Inactive Date:

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

DG Fresh Distribution FL, LLC

- * is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above;
- * has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;
- * has appointed a registered agent and registered office in this State;
- * has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett Secretary of State

Processed By: Cert Web User

Verification #: 035405626