

2019 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M1600000824

**FILED
Nov 12, 2019
Secretary of State
3113361604CC**

Entity Name: FAMILY DOLLAR STORES OF FLORIDA, LLC

Current Principal Place of Business:

500 VOLVO PKWY
CHESAPEAKE, VA 23320

Current Mailing Address:

500 VOLVO PKWY
CHESAPEAKE, VA 23320 US

FEI Number: 62-1147034

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS ST
TALLAHASSEE, FL 32301 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title PRESIDENT
Name MCCAFFETY, LONNIE W.
Address 500 VOLVO PKWY
City-State-Zip: CHESAPEAKE VA 23320

Title SENIOR VP, CHF LGL OFF, GEN
 CNSL, SECRETARY
Name OLD, WILLIAM A JR.
Address 500 VOLVO PKWY
City-State-Zip: CHESAPEAKE VA 23320

Title ASST. SECRETARY
Name BOSCIA, SANDRA L.
Address 500 VOLVO PKWY
City-State-Zip: CHESAPEAKE VA 23320

Title VP
Name MILLER, DEBORAH
Address 500 VOLVO PKWY
City-State-Zip: CHESAPEAKE VA 23320

Title ASST. SECRETARY
Name YORK, CJ
Address 500 VOLVO PKWY
City-State-Zip: CHESAPEAKE VA 23320

Title VP, TREASURER
Name DEAN, ROGER
Address 500 VOLVO PKWY
City-State-Zip: CHESAPEAKE VA 23320

Title CHIEF DEVEOPMENT OFFICER
Name WALTERS, BRUCE
Address 500 VOLVO PKWY
City-State-Zip: CHESAPEAKE VA 23320

Title VP - TAX
Name ELDER, JONATHAN
Address 500 VOLVO PKWY
City-State-Zip: CHESAPEAKE VA 23320

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHAWN TA TOTTEN-MEDLEY

**VICE PRESIDENT AND
ASST. SECRETARY**

11/12/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title VP, ASST. SECRETARY
Name TOTTEN-MEDLEY, SHAWN
Address 500 VOLVO PKWY
City-State-Zip: CHESAPEAKE VA 23320

Title SENIOR VICE PRESIDENT
Name WILLIAMS, CHRISTOPHER
Address 500 VOLVO PKWY
City-State-Zip: CHESAPEAKE VA 23320

Title SENIOR VICE PRESIDENT
Name LITTLER, TODD
Address 500 VOLVO PKWY
City-State-Zip: CHESAPEAKE VA 23320

Title ASST. SECRETARY
Name HAY, DANA
Address 500 VOLVO PKWY
City-State-Zip: CHESAPEAKE VA 23320