

1.) CORPORATION NAME: FAMILY DOLLAR STORES OF VIRGINIA, INC.	DUE DATE: 6/30/2013		
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA	SCC ID NO: 01855279		
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY	5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">CLASS</td> <td style="width:50%;">AUTHORIZED</td> </tr> </table>	CLASS	AUTHORIZED
CLASS	AUTHORIZED		
4.) STATE OR COUNTRY OF INCORPORATION: VA			

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: P.O. BOX 1017

CITY/ST/ZIP: CHARLOTTE, NC 28201-1017

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: MICHAEL K. BLOOM TITLE: President/COO ADDRESS: PO BOX 1017 CITY/ST/ZIP/CO: CHARLOTTE, NC 28201-1017	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
--	---	-----------------------------------	--

NAME: STEVEN E BURT TITLE: VP/TREASURER ADDRESS: PO BOX 1017 CITY/ST/ZIP/CO: CHARLOTTE, NC 28201-1017	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
--	---	-----------------------------------	--

NAME: HOWARD R. LEVINE TITLE: CHAIRMAN, CEO ADDRESS: PO BOX 1017 CITY/ST/ZIP/CO: CHARLOTTE, NC 28201-1017	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
--	---	--	--

NAME: BETH R. MACDONALD TITLE: ASST SECRETARY ADDRESS: PO BOX 1017 CITY/ST/ZIP/CO: CHARLOTTE, NC 28201-1017	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
--	---	-----------------------------------	--

NAME: JAMES C. SNYDER, JR. TITLE: SVP/SECRETARY ADDRESS: PO BOX 1017 CITY/ST/ZIP/CO: CHARLOTTE, NC 28201-1017	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
--	---	-----------------------------------	--

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ BETH R. MACDONALD SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	BETH R. MACDONALD, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	6/26/2013 DATE
--	---	-------------------

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.