

LAW OFFICES  
PAUL M. MARMISH, P.A.

P.O. BOX 45-2536

MIAMI, FLORIDA 33247

(305) 860-7369

FAX (305) 860-3872

E-MAIL: PaulMMPA@aol.com

L00000003738

February 17, 2000

Registration Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

0000003143090--3  
-02/22/00-01059-007  
\*\*\*337.50 \*\*\*155.00

Re: Articles of Organization for  
Pasta Partners, L.L.C.

Ladies and Gentlemen:

Please find enclosed herewith duplicate executed originals of the Articles of Organization of Pasta Partners, L.L.C. together with our client's check payable to your order in the amount of \$337.50, which represents the filing fee and the fee for one certified copy of the Articles.

After the Articles of Organization have been filed, please return the certified copy of same to the undersigned in the self-addressed envelope provided.

Your courtesy and cooperation in this regard is most appreciated.

Sincerely yours,

*Paul M. Marmish*

PAUL M. MARMISH  
For the Firm

PMM/rrg  
Enclosure

FILED  
00 MAR 31 PM 4:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

L00-3738  
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D. *Qe*  
E. *Qe*  
Undertaker *Qe*  
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Undertaker *Qe*



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

February 28, 2000

PAUL MARMISH  
P.O. BOX 45-2536  
MIAMI, FL 33245

SUBJECT: PASTA PARTNERS, L.L.C.  
Ref. Number: W00000005277

We have received your document for PASTA PARTNERS, L.L.C. and your check(s) totaling \$337.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective October 1, 1999, Chapter 608, Florida Statutes, does not require or permit the filing of an "Affidavit of Membership and Capital Contributions." Therefore, the enclosed document has not been filed and is being returned to you.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6020.

Tammi Cline  
Document Specialist

Letter Number: 200A00010623

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TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

PASTA PARTNERS, L.L.C.

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

5725 SW 8<sup>th</sup> Street  
Miami, Florida 33144

**ARTICLE III - Duration:**

The period of duration for the Limited Liability Company shall be:

Perpetual

**ARTICLE IV - Management:**

(Check the appropriate box and complete the statement)

☒ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

Carmen Sanders  
5725 SW 8<sup>th</sup> Street  
Miami, Florida 33144

☐ The Limited Liability Company is to be managed by the members and the name(s) and addressees of the managing member(s) is/are:

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TALLAHASSEE, FLORIDA

**ARTICLE V - Admission of Additional Members:**

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be:

Upon the written consent of a majority of the current members

**ARTICLE VI - Members Rights to Continue Business:**

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

Upon the written consent of a majority of the remaining members

Pasta Corp.

By: 

Carmen Sanders, President

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Carmen Sanders, President

Typed or printed name of signee

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TALLAHASSEE, FLORIDA

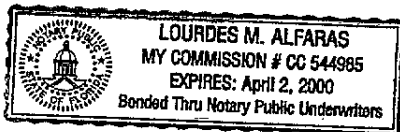
STATE OF FLORIDA

COUNTY OF MIAMI-DADE

I HEREBY CERTIFY that on this date personally appeared before me, an officer duly authorized to administer oaths and take acknowledgments, CARMEN SANDERS, to me known to be the person described in and who executed the foregoing instrument on behalf of Pasta Corp. and she duly acknowledged before me that she executed the same for the purposes therein expressed as the act and deed of said company.

Sworn to (or affirmed) and subscribed before me this 14th day of February, 2000 by Carmen Sanders.

(NOTARY SEAL)



Lourdes M. Alfaro  
Signature of Notary- State of Florida

Lourdes M. Alfaro  
Name of Notary Typed, Printed or Stamped

Personally Known \_\_\_\_\_ or Produced Identification ✓  
Type of Identification Produced Florida's driver license

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**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.

1. The name of the limited liability company is: PASTA PARTNERS, L.L.C.

2. The name and the Florida street address of the registered agent are:

PAUL M. MARMISH

Name

3390 KAPOT TERRACE

Florida street address (P. O. Box NOT ACCEPTABLE)

MIRAMAR, FL 33025

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TALLAHASSEE, FLORIDA

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

*Pl ml*

Signature