POLAR TREAT, LLC®

SHAVE ICE COMPANY

HLM

_____3410 SW 11TH ST. - MIAMI, FL 33135

ANDREW & ISIS GOTTLIEB, PROPRIETORS • LICENSED & INSURED • CONTACT US IN MIAMI: PHONE/FAX (305) 529-5553

April 3, 2001

L010000Q5420

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Sir/Madame:

000003973280--5 -04/09/01--01135--021 ****125.00 ****125.00

As is required by Florida law, please find attached:

- 1) the articles of organization for "Polar Treat," and
- 2) a check for \$125.00 to cover the filing fee and designation of registered agent.

Thank you for your help in establishing our company, and please contact us at the above address, phone, or fax number if any further information is needed.

Sincerely yours,

Tsis Gottlieb

Andy Got#lieb

DI APR -9 PM 5: (
SECRETARY OF STALL
II AHASSEF FI OB

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Polar Treat, LLC

ARTICLE II - Address:

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

3410 S.W. 11th Street Miami, Florida 33135

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Isis	Gott1	ieb		-	-
3410	s.w.	llth	Name Street		
Florida s Miami	street a	ddress	(P.O. Box NO	OT accepta 33135	ble)
		City,	State, and Zin)	

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 as provided for in Chapter 608, F.S.

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is reque	
Signature of a member or an authorized representative of a member	:•
(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjuthat the facts stated herein are true.) ANDREW GOTTLIEB	у
ISIS GOTTLIEB	
Typed or printed name of signee	
Ciling Food	

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)