



REFERENCE : 122663 4325458

AUTHORIZATION :

COST LIMIT : \$ PREPAID

ORDER DATE : April 20, 2001

ORDER TIME : 10:43 AM

ORDER NO. : 122663-005

CUSTOMER NO: 4325458

CUSTOMER: Robert S. Rubin, Esq
Cohen Todd Kite & Stanford

16th Floor
525 Vine Street
Cincinnati, OH 452023124

DOMESTIC FILING

NAME: AL DENTE, LLC

EFFECTIVE DATE:

_____ ARTICLES OF INCORPORATION
 _____ CERTIFICATE OF LIMITED PARTNERSHIP
 XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sandra Mathis - EXT. 1165

EXAMINER'S INITIALS:

01 APR 20 PM 12:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

RECEIVED
01 APR 20 AM 11:39
DIVISION OF CORPORATION

**ARTICLES OF ORGANIZATION
OF
al dente, LLC**

**ARTICLE I
NAME**

The name of the Limited Liability Company is al dente, LLC.

**ARTICLE II
ADDRESS**

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

c/o Franklin Carson
Suite 305
Tampa Bay Marina Center
205 South Hoover Street
Tampa, FL 33609

**ARTICLE III
REGISTERED AGENT, REGISTERED OFFICE &
REGISTERED AGENT'S SIGNATURE**

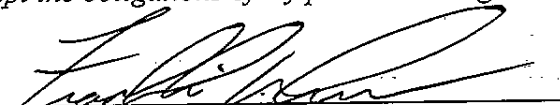
The name and the Florida street address of the registered agent are:

Franklin Carson
Suite 305
Tampa Bay Marina Center
205 South Hoover Street
Tampa, FL 33609

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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

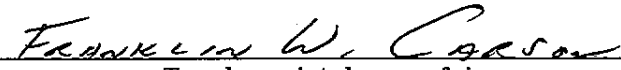
**ARTICLE IV
MANAGEMENT**

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



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 perjury that the facts stated herein are true.)



Typed or printed name of signee

APPROVED
AND
FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA