

Division of Corporations

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : BERGER SINGERMAN
Account Number : I19990000048
Phone : (954) 525-9900
Fax Number : (954) 523-2872

LIMITED LIABILITY COMPANY

EAST SIDE PUB, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

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8-28-02

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**ARTICLES OF ORGANIZATION
OF
EAST SIDE PUB, LLC
A FLORIDA LIMITED LIABILITY COMPANY**

The undersigned, in forming a Florida Limited Liability Company ("Company") under the Florida Limited Liability Company Act, Chapter 608 of the Florida Statutes, hereby adopt the following Articles of Organization for such Company:

ARTICLE I

NAME

The name of the Company is EAST SIDE PUB, LLC.

ARTICLE II

ADDRESS

The mailing address and the street address of the principal office of the Company is 420 NE 3rd Street, Fort Lauderdale, Florida 33301.

ARTICLE III

INITIAL REGISTERED AGENT AND REGISTERED OFFICE

The name and street address of the initial Registered Agent of the Company is James L. Berger, 350 East Las Olas Boulevard, Suite 1000, Fort Lauderdale, Florida 33301.

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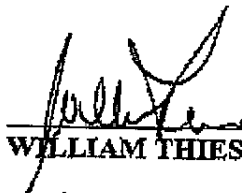
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In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.


Dated: August 28, 2002


WILLIAM THIES, Member

ACCEPTANCE OF DESIGNATION AS REGISTERED AGENT

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, Florida Statutes.

Dated: August 28, 2002


JAMES L. BERGER,
Initial Registered Agent

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