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To:

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

From:

Account Name : GARY, DYTRYCH & RYAN, P.A.
Account Number : T19990000255
Phone : (561) 844-3700
Fax Number : (561) 844-2388

DIVISION OF CORPORATION

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LIMITED LIABILITY COMPANY

Alexia's , LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

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ARTICLES OF ORGANIZATION
FOR
Alexia's, LLC
a Florida Limited Liability Company

The undersigned, desiring to form a limited liability company under and pursuant to Florida Statute 608 entitled the Florida Limited Liability Company Act, do hereby adopt the following Articles of Organization for such company:

1. Name. The name of the limited liability company is: Alexia's, LLC
2. Duration/Continuation. The period of this company's duration shall be perpetual, unless terminated by the unanimous written agreement of all members or by the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or upon the occurrence of any other event which terminates the continued membership of a member, unless the business of the company is continued by the consent of all the remaining members, or by amendment of these Articles of Organization providing for the continued existence of the company subsequent to the foregoing events.
3. The mailing and the street address of the principal office of the company is: 202 Birkdale Lane, Jupiter, FL 33458.
4. Registered Agent and Office. The name and the Florida street address of the initial registered agent and office for this company is as follows: James H. Ryan, at Gary, Dytrych & Ryan, P.A., 701 U.S. Hwy. One, Ste. 402, N. Palm Beach, FL 33408.
5. Admission of Additional Members; and Terms and Conditions of such Admissions. Additional Members may be admitted only upon the unanimous approval of the nontransferring members of the Company upon the written application of such new Member, in the manner set forth in the Operating Agreement of the Company.
6. Right to Continue Business. Company shall be dissolved upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a Member or upon the occurrence of any other event which terminates the continued membership of a Member in the Company, unless the business of the Company is continued by the consent of all the remaining Members.
7. Management of Company. The business of the Company is to be managed by one or more of the Members and is therefore, a member managed company. The names and addresses of the Managerial Members are:

<u>Names</u>	<u>Addresses</u>
Paul J. Pfohl	<u>202 Birkdale Lane</u> <u>Jupiter, FL 33458</u>
T. Alexia Pfohl	<u>202 Birkdale Lane</u> <u>Jupiter, FL 33458</u>

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8. Informal Action of Members. Any action of the Members may be taken without a meeting if consent in writing setting forth the action so taken shall be signed by all Members who would be entitled to vote upon such action at a meeting (and filed with the Manager(s) of the Company as part of its records.)

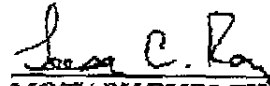
IN WITNESS WHEREOF, the undersigned member has hereunto set his hands and seals this 15 day of January, 2003.



Paul J. Pfohl, as a member and
authorized representative

STATE OF FLORIDA
COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me this 15 day of January, 2003, by Paul J. Pfohl, who is personally known to me or who has produced driver's license as identification.


NOTARY PUBLIC

REGISTERED AGENT ACCEPTANCE

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.


James H. Ryan

STATE OF FLORIDA
COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me this 15 day of January, 2003, by James H. Ryan, who is personally known to me or who has produced _____ as identification.


NOTARY PUBLIC

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