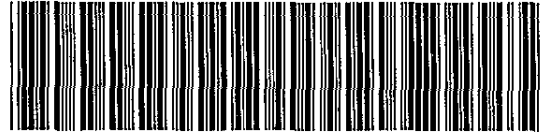


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TALLAHASSEE, FLORIDA

ACCOUNT NO. : 072100000032

REFERENCE : 018884 10463A

AUTHORIZATION : *Patricia Pignatelli*

COST LIMIT : \$ 155.00

ORDER DATE : April 10, 2003

ORDER TIME : 10:40 AM

ORDER NO. : 018884-005

CUSTOMER NO: 10463A

CUSTOMER: Ms. Larissa K. Lincoln
Cohen Norris Scherer
Weinberger & Wolmer
Suite 400
712 U.S. Highway 1
North Palm Bch, FL 33408-7146

DOMESTIC FILING

NAME: 5 STAR PIZZA, LLC

EFFECTIVE DATE: 4/8/03

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

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX ____ CERTIFIED COPY
____ PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward - EXT. 1135

EXAMINER'S INITIALS: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION OF
5 STAR PIZZA, LLC**

The undersigned hereby forms and establishes a limited liability company pursuant to Chapter 608, Florida Statutes as follows:

ARTICLE I

The name of this limited liability company is 5 STAR PIZZA, LLC.

ARTICLE II

This limited liability company shall become effective on **APRIL 8, 2003**, unless sooner terminated as provided in the Operating Agreement executed or to be executed by the members..

ARTICLE III

The mailing address and street address of the principal place of business of this limited liability company is 2609 No. Dixie Highway, Wilton Manors, FL 33334. This limited liability company may, at its discretion, change the address of its principal place of business.

ARTICLE IV

The name and street address of the initial registered agent of this limited liability company is BLAINE C. DICKENSON, 712 U.S. Highway One, Suite 400. North Palm Beach, Florida 33408.

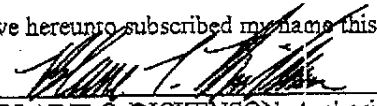
ARTICLE V

The management of this limited liability company shall be vested in a member or members (i.e. management committee as described in the Operating Agreement) and is, therefore, a member-managed company.

ARTICLE VI

Additional members may be admitted to this limited liability company upon such terms and conditions as shall be established by the members as described in the Operating Agreement.

IN TESTIMONY WHEREOF, I have hereunto subscribed my name this 8th day of April, 2003.


BLAINE C. DICKENSON, Authorized
Representative
of the Managing Member

Apr-08-03 06:05pm From-COHEN NORRIS SCHERER

5618424104

T-334 P.04/05 F-393

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03 APR 10 PM 2:00

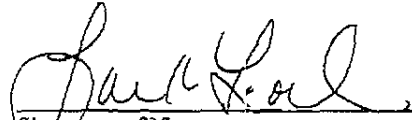
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF FLORIDA)

COUNTY OF PALM BEACH)

The foregoing instrument was acknowledged before me this 8th day of April, 2003, by BLAINE C. DICKENSON, who is personally known to me or who has produced Florida State Driver's License Number N/A as identification and who did () or did not (X) take an oath.

Executed this 8th day of April, 2003.



Signature of Notary

Printed Name: LARISSA K. LINCOLN

My Commission Expires:

My Commission Number:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE DESIGNATING REGISTERED
OFFICE FOR THE SERVICE OF PROCESS
WITHIN THIS STATE, NAMING AGENT
UPON WHOM PROCESS MAY BE SERVED**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA
STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE
FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED
AGENT, IN THE STATE OF FLORIDA.

That **5 STAR PIZZA, LLC**, a Florida Limited liability company, with its registered
office at 2609 No. Dixie Highway, Wilton Manors, FL 33334, has named **BLAINE C.
DICKENSON**, at 712 U.S. Highway One, Ste 400, North Palm Beach, FL 33408, as its initial
registered agent to accept service of process within this State.

ACKNOWLEDGMENT:

Having been named registered agent to accept service of process for the above-stated
limited liability company at the place designated in this Certificate, I hereby accept to act in such
capacity and agree to comply with the applicable provisions of law.

By: 

BLAINE C. DICKENSON,
Registered Agent

STATE OF FLORIDA)

COUNTY OF PALM BEACH)

The foregoing instrument was acknowledged before me this 8th day of April, 2003 by
BLAINE C. DICKENSON, who is personally known to me or who has produced Florida State
Driver's License Number N/A as identification and who did () or did
not (X) take an oath.

Executed this 8th day of April, 2003.


Signature of Notary

Printed Name: **LARISA K. LINCOLN**

My Commission Expires:

My Commission Number: