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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

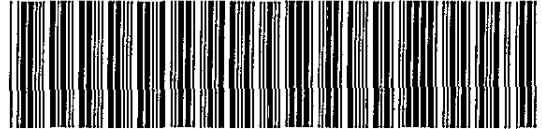
(Document Number)

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Certificates of Status \_\_\_\_\_

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OFFICE OF CORPORATIONS  
TALLAHASSEE, FLORIDA

J. BRYAN , III 28 2003

**ALLAN M. GLASER, P.A.**

Biscayne Centre  
Suite 807  
11900 Biscayne Boulevard  
Miami, Florida 33181

ALLAN M. GLASER  
ATTORNEY AT LAW

TELEPHONE  
TELEFAX

(305) 893-5999  
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July 21, 2003

Registration Section  
Division of Corporation  
P.O. Box 6327  
Tallahassee, Florida 32314

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2003 JUL 23 PM 2:22  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

Re: Articles of Organization for Stein's Deli, LLC  
Our File No.: 4255-0

Dear Sir or Madam:

Enclosed please find the Articles of Organization for Stein's Deli, LLC, a Florida Limited Liability Company. Also enclosed is a check payable to the FLORIDA DEPARTMENT OF STATE in the amount of \$130.00 for the filing fee for the Articles of Organization and Designation of Registered Agent, together with the fee for the return of a Certificate of Status along with a self addressed-stamped envelope to return the documents.

I look forward to a prompt receipt of the letter of acknowledgement together with the Certificate of Status. If you have any questions regarding the above request, please call the undersigned.

Cordially yours,



ALLAN M. GLASER

AMG/vr

Enc.

136024255-0/0702103

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

STEIN'S DELI, LLC

**ARTICLE II - Address:**

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

3300 N.E. 192<sup>nd</sup> Street  
Suite 1809  
Aventura, Florida 33180

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

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

Allan M. Glaser

Name


11900 Biscayne Boulevard Suite 807

Florida street address (P.O. Box NOT acceptable)

Miami, Florida 33181

City, State, and Zip

*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.*



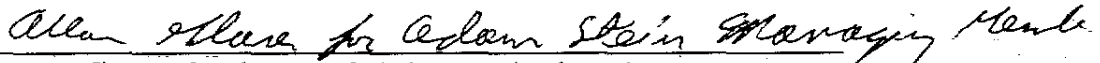
Registered Agent's Signature

**ARTICLE IV - Management (Check box if applicable.)**



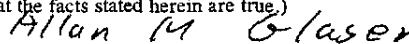
The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company. The manager shall be Adam Stein.

(An additional article must be added if an effective date is requested)



Signature of 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

**Filing Fees:**

\$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)

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