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LIMITED LIABILITY COMPANY

Ice Carver's Choice Florida, LLC

Certificate of Status	0
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FAX AUDIT # 410400000 15333

**ARTICLES OF ORGANIZATION
OF
Ice Carver's Choice Florida, LLC**

ARTICLE I NAME

The name of the limited liability company shall be: **Ice Carver's Choice Florida, LLC**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 2526 Fawnlake Trl., Orlando, Florida 32828.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Lianne Rimer, 2526 Fawnlake Trl., Orlando, Florida 32828. Located in the County of Orange.


ARTICLE IV DURATION

The duration for the limited liability company shall be: 12/31/2043.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the names and addresses of the members of the Limited Liability Company are:

Joseph Rimer, 2526 Fawnlake Trl., Orlando, Florida 32828
Lianne Rimer, 2526 Fawnlake Trl., Orlando, Florida 32828


Business Filings Incorporated, Organizer
Mark Schiff, AVP
Authorized Representative
Prepared by Mark Schiff, Business Filings Incorporated, 8025 Excelsior Dr., Suite 200,
Madison, WI 53717
(608) 827-5300

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FAX AUDIT # 404 00000 1533 3CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES,
THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE
STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN
DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE
STATE OF FLORIDA.

The name of the limited liability company is: **Ice Carver's Choice Florida, LLC**

The name and address of the registered agent and office is: Lianne Rimer, 2526 Fawnlake
Trl., Orlando, Florida 32828. Located in the County of Orange.

Having been named as registered agent and to accept service of process for the above
stated 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.

Signature: _____

Lianne Rimer

Date: December 17, 2003

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TALLAHASSEE, FLORIDA

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