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ANASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Windy City Ribs 1-1C. (Name of Limited Liability Company)	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Wendy C. Lec (Name of Person)	J. 19. C.
Windy City Ribs L.L.C. (Firmy Company)	04 51 0mg
870 11Th Drive (Address)	
Vero Beach F1. 32960 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Wendy C. Lea at (772) 194-2713 (Area Code & Daytime Telephone Number)	
STREET ADDRESS: Registration Section Division of Corporations MAILING ADDRESS: Registration Section Division of Corporations	

P.O. Box 6327

Tallahassee, Florida 32314

409 E. Gaines Street

Tallahassee, Florida 32399

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is: Windy City Ribs L.L.C.

ARTICLE I - Name:

ADTICI E II Addresse

office of the Limited Liability Company is:
Mailing Address:
wendy C. Lee
870 11th Drive
Vero Beach, Florida 3296
& Registered Agent's Signature:
I agent are:
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T acceptable)

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

City, State, and Zip

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manage	er or Managing Member is as follows:
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
"MGR"	12 Starte C. Leo 870 Starte Ozive Lero Beach, Florida 32460
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	ON THE SEE TO THE TENTH OF THE PARTY OF THE
(Use attachment if necessary)	- Cally la
NOTE: An additional article must b	oe added if an effective date is requested.
REQUIRED SIGNATURE:	

Signature of a 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)