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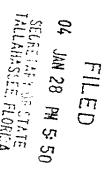




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ACCOUNT NO. : 072100000032

REFERENCE: 414231 7175

AUTHORIZATION:

COST LIMIT : \$ 195.00

ORDER DATE: January 28, 2004

ORDER TIME : 2:26 PM

ORDER NO. : 414231-005

CUSTOMER NO: 7175508

CUSTOMER: Ms. Erika J. Kedzlerski

ARTICLES OF INCORPORATION

Levenfeld Pearlstein

Suite 1300

2 North Lasalle St. Chicago, IL 60602

DOMESTIC FILING

NAME: MARC DEEP-DISH PIZZA LLC

EFFECTIVE DATE:

CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY (2) PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING (2)	
CONTACT PERSON: Darlene Ward - EXT. 2935 EXAMINER'S INITIALS:	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE Y-Name:

The name of the Limited Liability Company is:

MARC DEEP-DISH PIZZA LLC

ARTICLE II - Address:

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

200 WEST JACKSON, 12TH FLOOR, CHICAGO, IL 60606

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

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

CORPORATION SERVICE COMPANY		
Name		
1201 HAYS STREET		
Florida street address (P.O. Box NOT acceptable)		
TALLAHASSEE . FI 32301		
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 of registered agentlas provided for in Chapter 608, F.S..

Registered Agonl'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.

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

Signature of a member of an authorized representative of a member,

(in accordance with section 608.408(3), Finring Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

THOMAS G. JAROS, AUTHORIZED REPRESENTATIVE
Typed or printed name of signee

FILING FEES: 3 100.00 Fitting Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent \$ 39.90 Certified Copy (OPTONAL) \$ 5.00 Certificate of Status (OPTIONAL)