

L04000019460

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

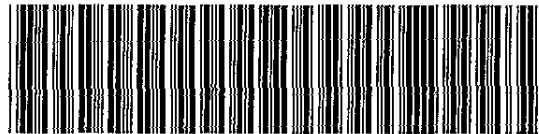
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TALLAHASSEE, FLORIDA

3/11/04

Requestor's Name  
William J. Segall  
Address  
20801 Biscayne Blvd #304  
North Miami Beach, FL 33180  
City State ZIP Phone  
(805) 682-1110

CORPORATION(S) NAME

GD Pasta, L.L.C

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Profit                     | <input type="checkbox"/> Amendment       | <input type="checkbox"/> Merger                     |
| <input type="checkbox"/> NonProfit                  | <input type="checkbox"/> Dissolution     | <input type="checkbox"/> Mark                       |
| <input type="checkbox"/> Foreign                    | <input type="checkbox"/> Annual Report   | <input checked="" type="checkbox"/> Other L.L.C     |
| <input type="checkbox"/> Limited Partnership        | <input type="checkbox"/> Reservation     | <input type="checkbox"/> Change of Registered Agent |
| <input type="checkbox"/> Reinstatement              | <input type="checkbox"/> Photo Copies    | <input type="checkbox"/> Certificate Under Seal     |
| <input checked="" type="checkbox"/> Certified Copy  | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30                 |
| <input checked="" type="checkbox"/> Call When Ready | <input type="checkbox"/> Will Wait       | <input checked="" type="checkbox"/> Pick Up         |
| <input type="checkbox"/> Walk In                    |  | <input type="checkbox"/> Mail Out                   |

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

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**ARTICLE I - NAME**

The name of the Limited Liability Company is:

*G D Pasta, L.L.C.*

**ARTICLE II - ADDRESS**

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

1825 East Hallandale Beach Boulevard  
Hallandale, Florida 33009

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE**

**& REGISTERED AGENT'S SIGNATURE**

The name and the Florida street address of the Registered Agent is:

William J. Segal  
20801 Biscayne Boulevard  
Suite 304  
Aventura, Florida 33180

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.

  
\_\_\_\_\_  
William J. Segal, Registered Agent

**ARTICLE IV - MEMBERS**

The name and address of the person signing these Articles of

Organization is:

Gaetania DiNatale  
2214 East 73<sup>rd</sup> Street  
Brooklyn, NY 11234

IN WITNESS WHEREOF, the undersigned member has executed these  
Articles of Organization this 10 day of March, 2004.

  
\_\_\_\_\_  
Gaetania DiNatale, 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)