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To:

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From:

Diana M. Guerra (Ext. 4546)
Account Name : AKERMAN, SENTERFITT & EIDSON, P.A.
Account Number : 075471001363
Phone : (305)374-5600
Fax Number : (305)374-5095

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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

CHISPA RESTAURANT-DORAL, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
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**ARTICLES OF ORGANIZATION OF
CHISPA RESTAURANT-DORAL, LLC
(a Florida Limited Liability Company)**

**ARTICLE I
NAME**

The name of the limited liability company is **Chispa Restaurant-Doral, LLC**.

**ARTICLE II
ADDRESS**

The mailing address and street address of the principal office of the limited liability company is 312 Minorca Avenue, Coral Gables, Florida 33134.

**ARTICLE III
DURATION**

The period of duration for the limited liability company shall begin on the date of filing these Articles of Organization with the Florida Department of State and shall have a perpetual existence and duration, until terminated in accordance with applicable law.

**ARTICLE IV
INITIAL REGISTERED OFFICE AND AGENT**

The street address of the limited liability company's initial registered agent is One S.E. Third Avenue, 28th Floor, Miami, Florida 33131. The name of the limited liability company's initial registered agent at that office is American Information Services, Inc.

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IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 2nd day of September, 2004.


Mike Tomas, Authorized Representative
of a Member

**CERTIFICATE OF ACCEPTANCE BY
REGISTERED AGENT**

Pursuant to the provisions of Sections 608.407 and 608.415 of the Florida Limited Liability Company Act, the undersigned submits the following statement in accepting the designation as registered agent of Chispa Restaurant-Doral, LLC, a Florida limited liability company (the "Company"), in the Company's articles of organization:

Having been named as registered agent and to accept service of process for the Company at the registered office designated in the Company's articles of organization, the undersigned accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and the undersigned is familiar with and accepts the obligations of its position as registered agent.

IN WITNESS WHEREOF, the undersigned has executed this Certificate this 2nd day of September, 2004.

AMERICAN INFORMATION
SERVICES, INC.

By: 
Diana M. Guerra, Assistant Secretary

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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