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WUY-36700 J. BRYAN OCT 5 2004

J. BRYAN OCT 1 5 2004

### TRANSMITTAL LETTER

	tration Section ion of Corporations	
SUBJECT: _	GOLDEN CORRALS OF SW FLORIDA (Name of Limited Liability Company)	
The enclosed A	Articles of Organization and fee(s) are submitted for filing.	
	Please return all correspondence concerning this matter to the following:	
	EARL WILSON	Tall and I was
	(Name of Person)	
	*******	Sy 2
-	(Firm/Company)	- K. J.
	3481 LAKESIDE DR. NE #TSG	13/E
	(Address)	75
	ATLANTA GA 30326 (City/State and Zip Code)	~
	(City/State and Zip Code)	
For further inf	formation concerning this matter, please call:	
EAR	(Name of Person) at ( YoY ) 237 - 6046 (Area Code & Daytime Telephone Number)	

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314



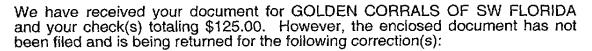
#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 5, 2004

EARL WILSON 3481 LAKESIDE DR. NE #T56 ATLANTA, GA 30326

SUBJECT: GOLDEN CORRALS OF SW FLORIDA

Ref. Number: W04000036700



The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Letter Number: 104A00057819

Joey Bryan Document Specialist TALLAND SEE TONDANS

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ALAHASSEE FLAME	
TAILANASSEE FLORIDANS	5

ARTICLE I - Name:	:		
The name of the Limi	ted Liability Company is	s:	

ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

Mailing Address:

3481 LAKESIDE DR. NE # TSG

ATLANTA, GA 30324

ATLANTA, GA 30324

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

FT MYERS FLORIDA 33912
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 as registered agent as provided for in Chapter 608, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

ACCAMASSEE FORATIONS

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

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:			
_MGRM	EARL WILSON			
	3481 LAKESIDE DR. NE # TSG			
	ATLANTA, GA 30326			
MGR	RANDAUL E. MILLER			
	GREENILLE, NC 27858			
<del></del>				
(Use attachment if necessary)				
NOTE: An additional article must be REQUIRED SIGNATURE:	added if an effective date is requested.			
Ene Wilso	_ X			
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.)				
EARL	WILSON			
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)