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(Address)

(Address)

(City/State/Zip/Phone #)

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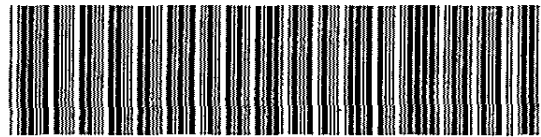
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STATE OF FLORIDA
TALLAHASSEE

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DONNA J. FELDMAN, P.A.

Donna J. Feldman
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Clearwater, Florida 33764

Telephone: 727.536.8003
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jjorczak@djflaw.com

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

Re: BUCA DEVELOPMENT, L.L.C.


Dear Sir or Madam:

Enclosed please find original and one copy of the Articles of Organization for BUCA Development, L.L.C., along with the filing fee of \$125.00. Please provide us with verification of filing by returning the enclosed copy stamped as received and filed.

Thank you for your attention to this request.

Very truly yours,

DONNA J. FELDMAN, P.A.


Jo Lynn Jorczak
Paralegal

/jlj
enclosures

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BUCA DEVELOPMENT, L.L.C.

ARTICLE II - Address:

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

Principal Office Address:

6402 W. Linebaugh Avenue
Tampa, FL 33625

Mailing Address:

6402 W. Linebaugh Avenue
Tampa, FL 33625

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

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

Matthew D. Campo

Name

3810 Palmira Avenue

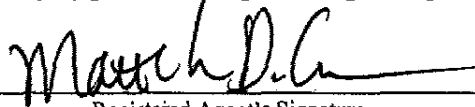
Florida street address (P.O. Box NOT acceptable)

Tampa, FL 33629

FL

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, F.S..



Registered Agent's Signature

(CONTINUED)

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Laurie Burcaw Revocable Trust

6402 Linebaugh Avenue

Tampa, FL 33625

MGRM

Campo Tampa, Inc.

3810 W. Palmira Avenue

Tampa, FL 33629

(Use attachment if necessary)

NOTE: An additional article must be 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.)

Matthew D. Campo

Typed or printed name of signee

Filing Fees:

**\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent**

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)